DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

A & A RESIDENTIAL CARE

440 LEE RD

COLUMBIA, SC 29229

HUNTER, KIMBERLY M PH#: 803-465-0907 Fac. Cont. Email: JJAY@MHA-SC.ORG

Certified For

CRC-1482 / 09/30/2009

Richland / Sole Proprietorship

440 LEE RD

COLUMBIA, SC 29229 SMITH, ANGELINE A

Total Number of Licensed Beds

Resident Beds: 4 Resident Rooms 2 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

A'LELIA RESIDENTIAL CARE

10 JACOB WHITE RD YEMASSEE, SC 29945

MILES, CARRIE R PH#: 843-466-0356

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1115 / 09/30/2009

Beaufort / Corporation 10 JACOB WHITE RD

YEMASSEE, SC 29945

MILES RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds 20

Resident Beds: 20 **Resident Rooms** 12 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

ABBEVILLE RESIDENTIAL CARE FACILITY INC

294 HWY 28 BYPASS ABBEVILLE, SC 29620

SIMPSON, JOYCE T PH#: 864-366-5758

Fac. Cont. Email: JOYT@FBCONNECTU.NET

Certified For Alzheimers Care

CRC-1098 / 06/30/2009 Abbeville / Corporation

294 HWY 28 BYPASS ABBEVILLE, SC 29620

ABBEVILLE RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds 5

> **Resident Beds:** 5 **Resident Rooms** 3 **Staff Rooms:** Staff Beds: 1 0 Other Beds: 0 Other Rooms: 0

ACLINE PLACE

200 S ACLINE ST LAKE CITY, SC 29560

WILCOX, KATHRYN D PH#: 843-394-5677

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1257 / 01/31/2010

Florence / State

1211 E NATIONAL CEMETERY RD

FLORENCE, SC 29506

FLORENCE COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Total Number of Licensed Beds

Resident Beds: 8 Resident Rooms 8 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

ADDISON'S COMMUNITY CARE HOME

4013 PERCIVAL RD COLUMBIA, SC 29223

DOCTOR, SARAH D PH#: 803-736-0455

Fac. Cont. Email: SARDCT@BELLSOUTH.NET

Certified For

CRC-0815 / 05/31/2009 Richland / Corporation

PO BOX 23328

COLUMBIA, SC 29224-3328

ADDISON COMMUNITY CARE HOME INC

Total Number of Licensed Beds

Resident Beds: 9 **Resident Rooms** 5 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

AGAPE ASSISTED LIVING AT GARDEN CITY INC

11951 GRANDHAVEN DR MURRELLS INLET, SC 29576

SHANLEY RN, LAURA J PH#: 843-357-0200

Fac. Cont. Email: WCHAPMAN@AGAPESENIOR.COM

Certified For Alzheimers Care

CRC-1424 / 08/31/2009

Horry / Corporation

11951 GRANDHAVEN DR MURRELLS INLET, SC 29576

AGAPE ASSISTED LIVING AT GARDEN CITY INC

Total Number of Licensed Beds 111

Resident Beds: 111 **Resident Rooms** 101 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

AGAPE ASSISTED LIVING AT LEXINGTON INC

5422 AUGUSTA RD LEXINGTON, SC 29072 RUSHTON, KIMBERLY A PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1478 / 07/31/2009 Lexington / Corporation

> 5422 AUGUSTA RD LEXINGTON, SC 29072

AGAPE ASSISTED LIVING OF LEXINGTON INC

Total Number of Licensed Beds 90

Resident Beds: 90 **Resident Rooms** 80 Staff Beds: Staff Rooms: 0 O Other Beds: 0 Other Rooms: 0

AGAPE ASSISTED LIVING INC

2705 LEAPHART RD

WEST COLUMBIA, SC 29169

SIPPEL, MARILYN E PH#: 803-939-3000 Fac. Cont. Email: BISPPEL@AGAPESENIOR.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1067 / 01/31/2010

Lexington / Corporation 2705 LEAPHART RD

WEST COLUMBIA, SC 29169 AGAPE ASSISTED LIVING INC

Total Number of Licensed Beds 184

Resident Beds: 184 Resident Rooms 144 Staff Beds: Staff Rooms: 0 0 0

Other Beds: 0 Other Rooms:

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1453 / 05/31/2009

Horry / Corporation

CONWAY, SC 29527

2320 HWY 378

AGAPE ASSISTED LIVING OF CONWAY INC

2320 HWY 378

Certified For

CONWAY, SC 29527-0000

STAUB, MATTHEW J PH#: 843-397-2273

Fac. Cont. Email: MATT@AGAPESENIOR.COM

Total Number of Licensed Beds 80

Resident Beds: 40 Resident Rooms 40 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

AGAPE ASSISTED LIVING OF CONWAY INC

AGAPE ASSISTED LIVING OF LAURENS INC

420 W FARLEY AVE LAURENS, SC 29360

MORGAN, MARY A PH#: 864-833-0386

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1439 / 01/31/2010 Laurens / Corporation 420 W FARLEY AVE

LAURENS, SC 29360

AGAPE ASSISTED LIVING OF LAURENS INC

Total Number of Licensed Beds 100

Resident Beds: 100 Resident Rooms 72
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

AGAPE ASSISTED LIVING OF ROCK HILL INC

1785 LEXINGTON COMMONS DR

ROCK HILL, SC 29731

CUNNINGHAM, REBECCA W PH#: 803-831-9900

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1486 / 12/31/2009 York / Corporation

AGAPE ASSISTED LIVING OF ROCK HILL INC

Total Number of Licensed Beds 90

Resident Beds: 90 Resident Rooms 80
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

AGAPE AT HARBISON

990 COLUMBIA AVE IRMO, SC 29063

SAMOL, APRIL B PH#: 803-749-7889

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1348 / 06/30/2009 Lexington / Corporation 990 COLUMBIA AVE IRMO, SC 29063 AGAPE HARBISON INC

Total Number of Licensed Beds 74

Resident Beds: 74 Resident Rooms 63
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

AGAPE AT KATHWOOD INC CRC-1317 / 06/30/2009 4520 TRENHOLM RD Richland / Corporation COLUMBIA, SC 29206 4520 TRENHOLM RD KEAR, DOUGAL L PH#: COLUMBIA, SC 29206 AGAPE AT KATHWOOD INC Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care Total Number of Licensed Beds 100

> **Resident Rooms** Resident Beds: 100 85 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

AIKEN'S COMMUNITY CARE HOME

216 CORA DR

COLUMBIA, SC 29203

AIKEN SR, CHARLES PH#: 803-754-4468

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Total Number of Licensed Beds 10

> Resident Beds: 10 **Resident Rooms** 5 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

ALDERSGATE AT THE OAKS

921 METHODIST OAKS DR

ORANGEBURG, SC 29116

JOHNSON, PATRICIA W PH#: 803-534-1212 Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1488 / 02/28/2010

CRC-0171 / 08/31/2009

SANTEE, SC 29142

PO BOX 405

Orangeburg / Sole Proprietorship

CRC-0807 / 03/31/2010

Richland / Corporation

COLUMBIA, SC 29203

121 DAKOTA ST

Orangeburg / Non-Profit Corporation

AIKEN'S COMMUNITY CARE HOME INC

ALDERSGATE SPECIAL NEEDS MINISTRY

Certified For Total Number of Licensed Beds

> **Resident Beds:** 6 **Resident Rooms** 6 **Staff Rooms:** Staff Beds: 1 1 Other Beds: 0 Other Rooms: 0

ALEXANDER'S GOLDEN STARR COMMUNITY CARE HOME

218 GOLDEN STARR RD SANTEE, SC 29142

OUTLAW-THOMAS, DONNA S PH#: 803-854-3731

Fac. Cont. Email: SHILANEDOT@AOL.COM

DONNA S OUTLAW-THOMAS

Certified For Total Number of Licensed Beds

> Resident Beds: 8 **Resident Rooms** 5 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0233 / 08/31/2009

1302 S MCDUFFIE ST

ANDERSON, SC 29624 ROBBIE J ALEXANDER

Anderson / Sole Proprietorship

ALEXANDER'S RESIDENTIAL HOME

1302 S MCDUFFIE ST ANDERSON, SC 29624

KELLER, BOBBIE J PH#: 864-225-6901

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 0
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

ANGELIC'S PLACE

903 W BARTLETTE ST SUMTER, SC 29150

GREENE, SHIRLEY H PH#: 803-775-1404

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1400 / 09/30/2009

Sumter / Ltd. Liability 903 W BARTLETTE ST SUMTER, SC 29150 ANGELIC'S PLACE LLC

Total Number of Licensed Beds 11

Resident Beds: 11 Resident Rooms 5
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

ANNOINTED RESIDENTIAL CARE

551 S SUMTER ST SUMTER, SC 29150

BRADLEY, DAISY E PH#: 803-840-1704

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1435 / 03/31/2010 Sumter / Partnership 551 S SUMTER ST SUMTER, SC 29150

COREY T WRIGHT & DAISY BRADLEY

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

ANTONIO-STAPLES RESIDENTIAL CARE FACILITY INC

10745 HWY 78

SUMMERVILLE, SC 29483

STAPLES, ERMELINDA M PH#: 843-821-8912

Fac. Cont. Email: ANTINIOSTAPLESRCF@COMCAST.NET

Certified For

CRC-0706 / 03/31/2009 (Renewal Pending)

Dorchester / Corporation

10745 HWY 78

SUMMERVILLE, SC 29483

ANTONIO-STAPLES RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds 24

Resident Beds: 24 Resident Rooms 10
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

APRIL VALLEY INC 149 APRIL VALLEY LN PICKENS, SC 29671

FLAUGHER, LISA A PH#: 864-859-1430 Fac. Cont. Email: L152A149@BELLSOUTH.NET

Certified For

Pickens / Corporation 149 APRIL VALLEY LN PICKENS, SC 29671

CRC-0017 / 01/31/2010

APRIL VALLEY INC

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 5 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

ASHLAN VILLAGE

415 BRENDA WAY LYMAN, SC 29365

FREE, ALTON G PH#: 864-949-7825

Fac. Cont. Email: AFREE@ASHLANVILLAGECOM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1483 / 10/31/2009

Spartanburg / Limited Liability

190 COOPER ESTATES

INMAN, SC 29349

ASHLAN PROPERTIES LLC

Total Number of Licensed Beds 72

Resident Beds: 72 **Resident Rooms** 54 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

ASHLEY HOUSE

526 HALTIWANGER RD GREENWOOD, SC 29649 MOORE, BRENT PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1404 / 11/30/2009

Greenwood / Corporation 526 HALTIWANGER RD GREENWOOD, SC 29649

ASSISTED LIVING CONCEPTS INC

Certified For

Total Number of Licensed Beds 44

Resident Beds: 44 39 **Resident Rooms Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

ASHLEY RIVER PLANTATION

2333 ASHLEY RIVER RD CHARLESTON, SC 29414

COOK, TIM E PH#: 843-766-9898

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1376 / 03/31/2010 Charleston / Ltd. Liability

2333 ASHLEY RIVER RD CHARLESTON, SC 29414

OAK HAVEN SENIOR LIVING LLC

Certified For Alzheimers Care Total Number of Licensed Beds 123

> Resident Beds: 123 **Resident Rooms** 95 Staff Beds: Staff Rooms: 0 0 0

Other Beds: 0 Other Rooms:

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1143 / 11/30/2009

Richland / Ltd. Liability

LOUISVILLE, KY 40202 ATRIA FOREST LAKE L L C

CRC-1461 / 01/31/2010

Richland / Corporation

213 LINGSTROM LN

COLUMBIA, SC 29212

CRC-1021 / 06/30/2009

PO BOX 1291

BETTY RAE KOGER

Colleton / Sole Proprietorship

WALTERBORO, SC 29488

B & J RESIDENTIAL HOMES INC

ATRIA FOREST LAKE 4551 FOREST DR COLUMBIA, SC 29206

ABEL, ANNE E PH#: 803-790-9800

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

Total Number of Licensed Beds 60

401 S FOURTH ST, STE 1900

Resident Beds: 60 Resident Rooms 55
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

B & J RESIDENTIAL HOMES

528 ATTERBURY DR COLUMBIA, SC 29203

WALL, CAMELIA B PH#: 803-414-1379

Fac. Cont. Email: BLUEPEACH2003@BELLSOUTH.NET

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Certified For

B & L RESIDENTIAL CARE

637 BAY ST

WALTERBORO, SC 29488

MITCHELL, ROBERTHA Y PH#: 843-549-2857

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Total Number of Licensed Beds

Resident Beds: 5 Resident Rooms 3
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BACKHOME CARE FACILITY INC 140 CHECKERBERRY CT

EUTAWVILLE, SC 29048

LEE-HODGES, DANIELLE R PH#: 803-492-9080

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0567 / 01/31/2010
Orangeburg / Corporation
650 COUNTY LINE RD
CROSS, SC 29436-9998
BACKHOME CARE FACILITY INC

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 7
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

BAILEY MANOR

Certified For

300 JACOBS HWY

CLINTON, SC 29325-9401 STANLEY, RITA G PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0732 / 08/31/2009

Laurens / Non-Profit Corporation

300 JACOBS HWY

CLINTON, SC 29325-9401

CAROLINA CHRISTIAN MINISTRIES INC

Total Number of Licensed Beds 30

Resident Rooms Resident Beds: 30 15 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

BAYBERRY OF GREENWOOD

116 ABBEY DR

GREENWOOD, SC 29646

GAMBRELL, CATHY B PH#: 864-223-6510

Fac. Cont. Email: THEBAYBERRY@NCTV.COM

CRC-0589 / 05/31/2009

Greenwood / Limited Liability Limited Partnership

116 ABBEY DR

GREENWOOD, SC 29646

EVERGREEN VILLAGES LIMITED PARTNERSHIP

Certified For Alzheimers Care

Total Number of Licensed Beds 23

Resident Beds: 23 **Resident Rooms** 23 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

BAYBERRY OF GREER

309 NORTHVIEW DR GREER, SC 29651

WAYNICK, CAROLE K PH#: 864-848-1935

Fac. Cont. Email: RHUNTER@RCDI.WS

CRC-0595 / 07/31/2009

Greenville / Limited Liability Limited Partnership

309 NORTHVIEW DR GREER, SC 29651

EVERGREEN VILLAGES LIMITED PARTNERSHIP

Certified For Alzheimers Care

Total Number of Licensed Beds 23

Resident Beds: 23 **Resident Rooms** 23 Staff Beds: Staff Rooms: 0 O Other Beds: 0 Other Rooms: 0

BEARD RESIDENTIAL CARE FACILITY #1

123 N WARREN ST

Certified For

TIMMONSVILLE, SC 29161

BEARD, CATHERINE H PH#: 843-346-5272 Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0140 / 04/30/2010

Florence / Sole Proprietorship

123 N WARREN ST

TIMMONSVILLE, SC 29161

CATHERINE H BEARD

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 3 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

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DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

BEARD RESIDENTIAL CARE FACILITY #2

301 N ORANGE ST

TIMMONSVILLE, SC 29161

BEARD, CATHERINE H PH#: 843-346-5272

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0082 / 04/30/2010 Florence / Sole Proprietorship

123 N WARREN ST

TIMMONSVILLE, SC 29161

CATHERINE H BEARD

Total Number of Licensed Beds

Resident Rooms Resident Beds: 8 3 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

BEARD'S RESIDENTIAL CARE FACILITY #3

201 N BROCKINGTON ST TIMMONSVILLE, SC 29161

BEARD, JAMES PH#: 843-346-5272

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0331 / 12/31/2009

Florence / Sole Proprietorship 201 N BROCKINGTON ST

TIMMONSVILLE, SC 29161 CATHERINE H BEARD

Total Number of Licensed Beds 8

Resident Beds: 8 **Resident Rooms** 3 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

BELL'S PROFESSIONAL RESIDENTIAL HOME CARE

1910 DALTON ST

NORTH CHARLESTON, SC 29406 BELL, FRANCE A PH#: 843-744-1765

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1209 / 05/31/2009

Charleston / Ltd. Liability 1155 MARQUIS RD

CHARLESTON, SC 29415

BELL'S PROFESSIONAL RESIDENTIAL HOME CARE L L C

Certified For Total Number of Licensed Beds 20

> Resident Beds: 20 8 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

BELLAIRE PLACE

23 SOUTHPOINTE DR GREENVILLE, SC 29607

TURNER III, THOMAS P PH#: 864-675-0220 Fac. Cont. Email: GREENVILLEBG.ED@SUNRISESENIORLIVING.COM Greenville / Corporation 3131 ELLIOTT AVE STE 500

CRC-1335 / 09/30/2009

SEATTLE, WA 98121 **EMERITUS CORPORATION**

Certified For Total Number of Licensed Beds 162

> Resident Beds: 162 Resident Rooms 82 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

BELLWOOD MANOR

10431 GARNERS FERRY RD

EASTOVER, SC 29044

GEATHERS, MARTHA A PH#: 803-315-0296 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0992 / 04/30/2007 (Renewal Pending)

Richland / Sole Proprietorship

PO BOX 9451

COLUMBIA, SC 29290 HARRIETTE JENERETTE

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 10 Staff Beds: 2 2 Staff Rooms: Other Beds: 0 Other Rooms: 0

BENTON VILLAGE OF SENECA

515 BENTON ST SENECA, SC 29672

MALONE, DEBBIE B PH#: 864-888-4114

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1466 / 11/30/2009

Oconee / Ltd. Liability 515 BENTON ST

SENECA, SC 29672

FKP SENECA SENIOR LIVING TENANT LLC

Total Number of Licensed Beds 62

Resident Beds: 62 **Resident Rooms** 47 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

BENZIE T RICE HOME

100 FINLEY RD

COLUMBIA, SC 29203-0000

MCMANUS, KENNETH H PH#: 803-691-5720

Fac. Cont. Email: KMCMANUS@BENZIERICE.ORG

Certified For Alzheimers Care

Alzheimers Unit

CRC-1075 / 03/31/2010 Richland / Corporation

100 FINLEY RD

COLUMBIA, SC 29203

LUTHERAN HOMES OF SOUTH CAROLINA INC

Total Number of Licensed Beds 50

Resident Beds: 50 **Resident Rooms** 50 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

BIRD STREET I COMMUNITY RESIDENTIAL CARE FACILITY

1705 BIRD ST

ROCK HILL, SC 29730

MCKNIGHT, SHARON PH#: 803-366-7121

Fac. Cont. Email: SMCKNIGHT@YORKDSNB.ORG

Certified For

CRC-1357 / 06/30/2009

York / State PO BOX 4706

COLUMBIA, SC 29240-4706

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds

Resident Beds: 8 Resident Rooms 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

BIRD STREET II COMMUNITY RESIDENTIAL CARE FACILITY

1711 BIRD ST ROCK HILL, SC 29730

MCKNIGHT, SHARON PH#: 803-366-6113

Fac. Cont. Email: SMCKNIGHT@YORKDSNB.ORG

Certified For

CRC-1358 / 06/30/2009

York / State

PO BOX 4706

COLUMBIA, SC 29240-4706

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds

Resident Beds: 8 **Resident Rooms** 4 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

BISHOP GADSDEN EPISCOPAL COMMUNITY

ONE BISHOP GADSDEN WAY CHARLESTON, SC 29412

TRAWICK, C WILLIAM PH#: 843-762-3300 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-0451 / 11/30/2009

Charleston / Non-Profit Corporation ONE BISHOP GADSDEN WAY CHARLESTON, SC 29412 **EPISCOPAL CHURCH HOME**

Total Number of Licensed Beds 112

Resident Beds: 112 Resident Rooms 112 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

BISHOPVILLE MANOR INC

2779 NORTH HWY 15 BISHOPVILLE, SC 29010

JONES, GENE E PH#: 803-432-1436 Fac. Cont. Email: BISHMANOR@FTC-I.NET

Certified For Alzheimers Care

CRC-1108 / 06/30/2009 Lee / Corporation PO BOX 312

BISHOPVILLE, SC 29010 **BISHOPVILLE MANOR INC**

Total Number of Licensed Beds 44

Resident Beds: 44 15 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

BOSTICK'S ADULT RESIDENTIAL CARE FACILITY

1912 DUKE ST

BEAUFORT, SC 29902

BOSTICK, JOSEPHINE G PH#: 843-524-3906 Fac. Cont. Email: MBJORDAN2@HARGRAY.COM

Certified For

CRC-0143 / 05/31/2009

Beaufort / Sole Proprietorship

PO BOX 1841

BEAUFORT, SC 29901 JOSEPHINE G BOSTICK

Total Number of Licensed Beds 20

Resident Beds: 20 **Resident Rooms** 6 Staff Beds: 2 Staff Rooms: 2 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

BOWLES COMMUNITY CARE HOME

9270 HWY 17 N

MCCLELLANVILLE, SC 29458

BOWLES, BENJAMIN PH#: 843-887-4180

Fac. Cont. Email: BBOWCARE@AOL.COM

Certified For

CRC-0090 / 09/30/2009

Charleston / Sole Proprietorship

9270 HWY 17 N

MCCLELLANVILLE, SC 29458

BENJAMIN, BOWLES

Total Number of Licensed Beds 16

Resident Beds: 16 **Resident Rooms** 4 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

BRADFORD GARDENS

1108 N MAIN ST MARION, SC 29571

GARDNER, JAMES L PH#: 843-275-0083 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1217 / 08/31/2009

Marion / Corporation

PO BOX 887

MARION, SC 29571 A & R ENTERPRISES INC

Total Number of Licensed Beds 80

Resident Beds: 80 **Resident Rooms 75** Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

BRAN DE ANA'S RESIDENTIAL CARE

836 MAGNOLIA RD

CHARLESTON, SC 29407

COCHRAN, CONNIE P PH#: 843-763-7471 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0809 / 06/30/2008 (Renewal Pending)

Charleston / Sole Proprietorship

PO BOX 30063

CHARLESTON, SC 29417

CONNIE P COCHRAN

Total Number of Licensed Beds

Resident Beds: 8 **Resident Rooms** 4 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

BRIAN'S RESIDENTIAL CARE

1115 WHITMAN ST

ORANGEBURG, SC 29115-6150

STOKES, ALBERT O PH#: 803-533-1588

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0418 / 02/28/2010 Orangeburg / Partnership

1027 BERKELEY DR

ORANGEBURG, SC 29118-0000 ALBERT STOKES AND DELAURA STOKES

Total Number of Licensed Beds

Resident Beds: 7 **Resident Rooms** 3 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

BRIAN'S RESIDENTIAL CARE II

4003 CALHOUN ST

BRANCHVILLE, SC 29432

STOKES, DELAURA J PH#: 803-274-8051

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Orangeburg / Partnership 1027 BERKELEY DR

CRC-0947 / 09/30/2009

ORANGEBURG, SC 29118-0000

ALBERT STOKES AND DELAURA STOKES

Total Number of Licensed Beds 20

Resident Beds: 20 Resident Rooms 11 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

BRIANA'S RESIDENTIAL CARE FACILITY

252 CHARLESTON AVE N

FAIRFAX, SC 29827

JENKINS, GENORA W PH#: 803-632-9813 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1333 / 11/30/2009

Allendale / Sole Proprietorship

649 HAMPTON AVE N FAIRFAX, SC 29827 JOHN W WALKER

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 5 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

BRIDGE ASSISTED LIVING AT LIFE CARE CENTER OF CHARLESTON

2590 ELMS PLANTATION BLVD

NORTH CHARLESTON, SC 29406

HITCHMAN, MARTINA E PH#: 843-553-6342

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1064 / 10/31/2009

Charleston / Ltd. Liability

2590 ELMS PLANTATION BLVD

NORTH CHARLESTON, SC 29406

CHARLESTON RETIREMENT INVESTORS L L C

Total Number of Licensed Beds 100 **Certified For**

> Resident Beds: 100 **Resident Rooms** 65 Staff Beds: Staff Rooms: 0 O Other Beds: 0 Other Rooms: 0

BRIDGEWAY COMMUNITY RESIDENTIAL CARE

62 BRIDGEWAY DR

LAURENS, SC 29360-7452

DUVALL, ELAINE C PH#: 864-855-1374

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0370 / 03/31/2010

Laurens / Corporation

PO BOX 821

LAURENS, SC 29630

COMMUNITY HEALTH SERVICES INC

Total Number of Licensed Beds 26

Resident Beds: 26 Resident Rooms 13 0 Staff Rooms: 0 Staff Beds: Other Beds: 0 Other Rooms: 0

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April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

BRIGHTON GARDENS OF GREENVILLE

1306 PELHAM RD

GREENVILLE, SC 29615

TOWERY, AL M PH#: 864-286-6600

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

Greenville / Corporation
1306 PELHAM RD

CRC-1140 / 01/30/2010

GREENVILLE, SC 29615

SUNRISE SENIOR LIVING SERVICES INC

Total Number of Licensed Beds 119

Resident Beds: 119 Resident Rooms 107
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BROAD CREEK COMMUNITY RESIDENTIAL CARE

801 LEMON GRASS CT

HILTON HEAD ISLAND, SC 29928-0000 JOHNSON, STEPHANI PH#: 843-341-7300

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1036 / 07/31/2009

Beaufort / Corporation 801 LEMON GRASS CT

HILTON HEAD ISLAND, SC 29928

CC-HILTON HEAD INC

Certified For Alzheimers Care

Total Number of Licensed Beds 50

Resident Beds: 50 Resident Rooms 50
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BROOK PINE COMMUNITY RESIDENTIAL CARE FACILITY

3961 FISH HATCHERY RD GASTON, SC 29053

WILLIAMS, MANDY N PH#: 803-955-3821

Fac. Cont. Email: MNM89@SCDMH.ORG

CRC-1302 / 06/30/2009

Lexington / State

3961 FISH HATCHERY RD

GASTON, SC 29053

LEXINGTON COUNTY COMMUNITY MENTAL HEALTH CENTER

(LCCMHC)

Certified For Total Number of Licensed Beds 16

Resident Beds: 16 Resident Rooms 11
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BROOKWAY COMMUNITY RESIDENTIAL CARE

141 BROOKWAY DR EASLEY, SC 29641 KAY, KEVIN B PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0023 / 03/31/2010

Pickens / Corporation

PO BOX 1807

EASLEY, SC 29641

COMMUNITY HEALTH SERVICES INC

Certified For Total Number of Licensed Beds 26

Resident Beds: 26 Resident Rooms 12 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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8

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0879 / 09/30/2009

PO BOX 4389

Lexington / Non-Profit Corporation

WEST COLUMBIA, SC 29171

BROOKWOOD COMMUNITY RESIDENCE

181 BROOKWOOD DR BATESBURG, SC 29006

RUFF JR, MURRY J PH#: 803-532-4440

Fac. Cont. Email: MGARRISON@BABCOCKCENTER.ORG

BABCOCK CENTER INC

Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms
Staff Beds: 0 Staff Rooms:
Other Beds: 0 Other Rooms:

BTU REST HOME INC

113 ELLISON ST

Certified For

BENNETTSVILLE, SC 29512-0352 CAIN, MICHAEL PH#: 843-479-9053

Fac. Cont. Email: MICHAELCAIN94@AOL.COM

PO BOX 352
BENNETTSVILLE, SC 29512

BTU REST HOME INC

CRC-0235 / 09/30/2009

Marlboro / Corporation

Certified For

Total Number of Licensed Beds 80

Resident Beds: 80 Resident Rooms 35 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

BURGESS RESIDENTIAL CARE FACILITY

2591 S BREHENAN DR FLORENCE, SC 29505

MALDROW, PATRICIA PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0925 / 04/30/2009

Florence / Sole Proprietorship

PO BOX 6023

FLORENCE, SC 29502

SANDY BURGESS

Certified For

Total Number of Licensed Beds 9

Resident Beds: 9 Resident Rooms 4
Staff Beds: 0 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

C & S ASSISTED LIVING

726 BARTON RD

ALLENDALE, SC 29810

MICKLE, DERRIEL PH#: 803-584-5090

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1220 / 08/31/2009

Allendale / Sole Proprietorship

726 BARTON RD

ALLENDALE, SC 29810

MARY ANN FIELDS

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 2
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CABADING HOMES #1 3431 RIVERS AVE

NORTH CHARLESTON, SC 29405

CABADING, LOLITA B PH#: 843-745-9182

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0394 / 07/31/2009 Charleston / Corporation 3431 RIVERS AVE

NORTH CHARLESTON, SC 29405

CABADING HOMES INC

Total Number of Licensed Beds 18

Resident Beds: 18 Resident Rooms 8 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

CABADING HOMES #2

3435 RIVERS AVE

NORTH CHARLESTON, SC 29405

CABADING, LOLITA B PH#: 843-745-9182

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0571 / 02/28/2010

Charleston / Corporation 2149 DORCHESTER RD

NORTH CHARLESTON, SC 29405

CABADING HOMES INC

Total Number of Licensed Beds 15

7 Resident Beds: 15 **Resident Rooms** Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CABADING HOMES #3

2149 DORCHESTER RD

NORTH CHARLESTON, SC 29405

CABADING, ALLAN M PH#: 843-745-9182

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0825 / 07/31/2009

Charleston / Corporation

2149 DORCHESTER RD

NORTH CHARLESTON, SC 29405

CABADING HOMES INC

Certified For Total Number of Licensed Beds 25

> Resident Beds: 25 **Resident Rooms** 13 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

CAMELOT ONE INC

124 GLADYS CT

SPARTANBURG, SC 29301

WALKER, LINDA C PH#: 864-587-1993

Fac. Cont. Email: LCWALKER428@YAHOO.COM

Certified For Alzheimers Care

CRC-1105 / 06/30/2009

Spartanburg / Corporation

124 GLADYS CT

SPARTANBURG, SC 29301

CAMELOT ONE INC

Total Number of Licensed Beds 22

Resident Beds: 22 **Resident Rooms** 11 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CAMP COMMUNITY RESIDENCE

1251 CAMP RD

JAMES ISLAND, SC 29412

GREEN, NATALIE PH#: 843-762-4625

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1371 / 01/31/2010 Charleston / State PO BOX 22708

CHARLESTON, SC 29413-2708

DISABILITIES BOARD OF CHARLESTON COUNTY

Total Number of Licensed Beds

Resident Beds: 8 **Resident Rooms** 8 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

CAROLINA HOUSE OF BLUFFTON

800 FORDING ISLAND RD BLUFFTON, SC 29910 GOLDEN, THOMAS E PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1381 / 04/30/2010 Beaufort / Corporation 800 FORDING ISLAND RD BLUFFTON, SC 29910

SOUTHERN ASSISTED LIVING INC

Total Number of Licensed Beds 70

Resident Beds: 70 **Resident Rooms** 70 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CAROLINA HOUSE OF HILTON HEAD

35 BEACH CITY RD

HILTON HEAD ISLAND, SC 29926

MAURY, RHONEDA V PH#: 843-342-5599

Fac. Cont. Email: RMAURY@SOUTHERNASSISTED.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1382 / 04/30/2010 Beaufort / Corporation

35 BEACH CITY RD

HILTON HEAD ISLAND, SC 29926 SOUTHERN ASSISTED LIVING INC

Total Number of Licensed Beds 72

Resident Beds: 72 **Resident Rooms** 58 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

CAROLINA PLACE

240 CHARLES ST LAKE CITY, SC 29504

UWAGBAI, LINDA G PH#: 843-394-5707

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1258 / 01/31/2010

Florence / State

1211 E NATIONAL CEMETERY RD

FLORENCE, SC 29506

FLORENCE COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Total Number of Licensed Beds

Resident Beds: 8 Resident Rooms 8 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CAROLINIAN 718 S DARGAN ST

FLORENCE, SC 29506-2561

ALMERS, KATHY M PH#: 843-665-9314

Fac. Cont. Email: THECAROLINIAN@RHF.ORG

Certified For Alzheimers Care

718 S DARGAN ST FLORENCE, SC 29506 FLORENCE RHF HOUSING INC

CRC-0468 / 04/30/2010

Florence / Corporation

Total Number of Licensed Beds 38

Resident Beds: 38 Resident Rooms 38
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CARRIAGE HOUSE OF FLORENCE INC

739 PARKER ST

FLORENCE, SC 29501

COLLINS, VIRGINIA L PH#: 843-661-6655

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0996 / 03/31/2010

Florence / Corporation 739 PARKER ST

FLORENCE, SC 29501

CARRIAGE HOUSE OF FLORENCE INC

Total Number of Licensed Beds 80

Resident Beds: 80 Resident Rooms 80
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CARRIAGE HOUSE OF HARTSVILLE

1311 E HOME AVE

HARTSVILLE, SC 29550-1320

MINGUS, KATHY L PH#: 843-383-6990

Fac. Cont. Email: CARRIAGEHOUSE521@BELLSOUTH.NET

CRC-0994 / 03/31/2010 Darlington / Corporation

PO BOX 1320

HARTSVILLE, SC 29550

CARRIAGE HOUSE OF HARTSVILLE

Certified For Total Number of Licensed Beds 60

Resident Beds: 60 Resident Rooms 30 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CARRIAGE HOUSE OF SUMTER INC

431 N MAIN ST

SUMTER, SC 29150-3300

GOLDEN, IDA M PH#: 803-773-0965

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0997 / 03/31/2010 Sumter / Corporation

PO BOX 3300

SUMTER, SC 29151-3300

CARRIAGE HOUSE OF SUMTER INC

For Total Number of Licensed Beds 60

Resident Beds: 60 Resident Rooms 30 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CARRIAGE HOUSE OF TAYLORS INC

402 W MAIN ST

TAYLORS, SC 29687-0000

PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0978 / 02/28/2010 Greenville / Corporation

402 W MAIN ST

TAYLORS, SC 29687

CARRIAGE HOUSE OF TAYLORS INC

Certified For Total Number of Licensed Beds 44

Resident Beds: 44 Resident Rooms 22
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CARRIGG MANOR I

7125 MAIN HWY

BAMBERG, SC 29003

CARRIGG, VIRGINIA H PH#: 803-245-5404
Fac. Cont. Email: CARRIGGV@AOL.COM

Certified For

CRC-0047 / 04/30/2009

Bamberg / Sole Proprietorship

7125 MAIN HWY

BAMBERG, SC 29003 VIRGINIA H CARRIGG

Total Number of Licensed Beds 22

Resident Beds: 22 Resident Rooms 13 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CARRIGG MANOR II

7171 MAIN HWY

BAMBERG, SC 29003

CARRIGG, VIRGINIA H PH#: 803-245-2552

Fac. Cont. Email: CARRIGGV@AOL.COM

rac. Cont. Email. CARRIGGV@AOL.CON

CRC-0222 / 04/30/2009

Bamberg / Sole Proprietorship

7171 MAIN HWY

BAMBERG, SC 29003

VIRGINIA H CARRIGG

Certified For Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CARSON'S COMMUNITY CARE

10219 FARROW RD

BLYTHEWOOD, SC 29016

CARSON, ANNIE P PH#: 803-786-7513

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0916 / 02/28/2010

Richland / Sole Proprietorship

10219 FARROW RD

BLYTHEWOOD, SC 29016

JAMES E CARSON

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CARTER-MAY HOME 1660 INGRAM RD CHARLESTON, SC 29401

BAUDER, JANINE N PH#: 843-556-8314

Fac. Cont. Email: JANINE@CATHOLIC-DOC.ORG

Certified For Alzheimers Care

Charleston / Corporation 1660 INGRAM RD

CRC-0064 / 04/30/2010

CHARLESTON, SC 29407

CATHOLIC CHARITIES OF THE DIOCESE OF CHARLESTON INC

Total Number of Licensed Beds 25

Resident Beds: 25 Resident Rooms 23 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

CASUAL COMMUNITY CARE HOME

112 GOODRICH ST

COLUMBIA, SC 29224-0000

BRIGGS, MARY E PH#: 803-788-2721

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0701 / 01/31/2010

Richland / Sole Proprietorship

PO BOX 121

STATE PARK, SC 29147-0121

MARY BRIGGS

Total Number of Licensed Beds 8

Resident Beds: 8 **Resident Rooms** 4 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

CATAWBA COMMUNITY CARE HOME INC

400 ROWELLS RD CATAWBA, SC 29704

TERRY, PATRICIA B PH#: 803-329-3377

Fac. Cont. Email: PATTERRY@CETLINK.NET

CRC-0743 / 11/30/2009 York / Corporation

PO BOX 65

CATAWBA, SC 29704-0065

CATAWBA COMMUNITY CARE HOME INC

Certified For Total Number of Licensed Beds 72

> Resident Beds: 72 31 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

CATHERINE'S MANOR I

376 TUCKLER ST

ORANGEBURG, SC 29115

CARR JR, GUSS PH#: 803-531-2088

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-0087 / 06/30/2009

Orangeburg / Sole Proprietorship

261 SUMMERS AVE

ORANGEBURG, SC 29115

CATHERINE CARR

Total Number of Licensed Beds

Resident Beds: 5 **Resident Rooms** 3 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CATHERINE'S MANOR II

261 SUMMERS AVE

ORANGEBURG, SC 29115

CARR JR, GUSS PH#: 803-539-0899

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1033 / 08/31/2009

Orangeburg / Sole Proprietorship

261 SUMMERS AVE

ORANGEBURG, SC 29115

CATHERINE CARR

Certified For Alzheimers Care **Total Number of Licensed Beds**

> Resident Beds: 5 Resident Rooms 3 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

CHARDON PLACE

3455 BOHICKET RD

JOHNS ISLAND, SC 29455

KULSICAVAGE, ANNA MARIE PH#: 843-768-4948

Fac. Cont. Email: DSWILLIS@YAHOO.COM

CRC-1462 / 01/31/2010

Charleston / Ltd. Liability

3455 BOHICKET RD

JOHNS ISLAND, SC 29455-7222

CHARDON PROPERTY LLC

Certified For Alzheimers Care

Total Number of Licensed Beds 16

Resident Beds: 16 **Resident Rooms** 16 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CHARLES M INGRAM SR COMMUNITY RESIDENCE

1615 STATE RD CHERAW, SC 29520

WRIGHT, STEPHANIE C PH#: 843-537-5122

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1440 / 05/31/2009

Chesterfield / County

1615 STATE RD

CHERAW, SC 29520

CHESTERFIELD COUNTY BOARD OF DISABILITIES AND SPECIAL

NEEDS

Certified For Total Number of Licensed Beds 8

> Resident Beds: 8 **Resident Rooms** 4 Staff Beds: 0 Staff Rooms: 0 0 0 Other Beds: Other Rooms:

CHEROKEE COUNTY COMMUNITY RESIDENTIAL CARE FACILITY

1434 N LIMESTONE ST GAFFNEY, SC 29340-4734

MATTHEWS, CINDY F PH#: 864-487-2717

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0729 / 09/30/2009

Cherokee / County

1434 N LIMESTONE ST GAFFNEY, SC 29340

CHEROKEE COUNTY COUNCIL

Certified For Alzheimers Care Total Number of Licensed Beds 48

> Resident Beds: 48 **Resident Rooms** 27 0 Staff Rooms: 0 Staff Beds: Other Rooms: 0

Other Beds: 0

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1441 / 05/31/2009

Chesterfield / County

CHESTERFIELD COMMUNITY RESIDENCE

817 E MAIN ST

CHESTERFIELD, SC 29709-0151

WRIGHT, STEPHANIE C PH#: 843-537-5122

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

817 E MAIN ST

CHESTERFIELD, SC 29709-0151

CHESTERFIELD COUNTY BOARD OF DISABILITIES AND SPECIAL

NEEDS

Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CLARENDON COMMUNITY RESIDENTIAL CARE CENTER INC

3625 ALEX HARVIN HWY MANNING, SC 29102

FENNELL JR, CURTIS A PH#: 803-473-3504

Fac. Cont. Email: ALFENNEL@MSN.COM

CRC-0805 / 02/28/2009 (Renewal Pending)

Clarendon / Corporation

PO BOX 640

MANNING, SC 29102-0640

CLARENDON COMMUNITY RESIDENTIAL CARE CENTER INC

Total Number of Licensed Beds 90

Resident Beds: 90 Resident Rooms 30 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CLARKE HOUSE

Certified For

919 SHILOH RD

SALUDA, SC 29138

CLARKE, IDORA H PH#: 864-445-8816

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0485 / 07/31/2009

Saluda / Sole Proprietorship

919 SHILOH RD SALUDA, SC 29138 IDORA H CLARKE

Total Number of Licensed Beds 18

Resident Beds: 18 Resident Rooms 6
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CLEMSON DOWNS ASSISTED LIVING

500 DOWNS LOOP CLEMSON, SC 29631

LEHEUP, JOHN D PH#: 864-654-1155

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1154 / 04/30/2010 Pickens / Corporation

500 DOWNS LOOP CLEMSON, SC 29631

CARC INC

Total Number of Licensed Beds 24

Resident Beds: 24 Resident Rooms 20 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1200 / 06/30/2009

CLS CARE HOME

1024-A TUCKERTOWN RD GADSDEN, SC 29052

SCOTT, GWENDOLYN PH#: 803-353-2151

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

Richland / Sole Proprietorship 1024-A TUCKERTOWN RD GADSDEN, SC 29052

CORA SCOTT

Total Number of Licensed Beds

Resident Beds: 5 **Resident Rooms** 3 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

COLLETON COURTYARD

210 ACADEMY RD

WALTERBORO, SC 29488

SCOTT, TRACY S PH#: 843-538-8181 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1484 / 11/30/2009

Colleton / Limited Liability 210 ACADEMY RD

WALTERBORO, SC 29488 **COLLETON COURTYARD LLC**

Total Number of Licensed Beds 44

27 Resident Beds: 44 **Resident Rooms** Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

COMMUNITY RESIDENTIAL CARE FACILITY

703 BROAD ST

SUMTER, SC 29150-6051

BRADLEY, DAISY E PH#: 803-773-6525

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0613 / 12/31/2009

Sumter / Non-Profit Corporation

PO BOX 3818

SUMTER, SC 29151

COMMUNITY INTERMEDIATE CARE FACILITY INC

Total Number of Licensed Beds 20 Certified For Alzheimers Care

> Resident Beds: 20 15 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

CONNIE'S RESIDENTIAL CARE #1

303 E HAMPTON ST

ANDERSON, SC 29624

MCLEES, SHANNON CRAFT PH#: 864-226-3797 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1470 / 10/31/2009

Anderson / Sole Proprietorship

PO BOX 13744

ANDERSON, SC 29624 SHANNON CRAFT MCLEES

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 3 Staff Beds: 2 Staff Rooms: 2 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CONNIE'S RESIDENTIAL CARE #2

1111 WHITE ST

ANDERSON, SC 29625

MCLEES, SHANNON CRAFT PH#: 864-225-9921 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1471 / 10/31/2009

Anderson / Sole Proprietorship

PO BOX 13744

ANDERSON, SC 29624 SHANNON CRAFT MCLEES

Total Number of Licensed Beds 9

Resident Beds: 9 Resident Rooms 4
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

COOPER HALL AT THE PALMS OF MT PLEASANT

937 BOWMAN RD

MT PLEASANT, SC 29464

DEFOOR, KENNETH E PH#: 843-388-2030

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1432 / 12/31/2009

Charleston / Ltd. Liability
300 N GREENE ST STE 1000

GREENSBORO, NC 27401 COOPER HALL SENIOR LIVING LLC

Total Number of Licensed Beds 44

Resident Beds: 44 Resident Rooms 25
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

COTTONWOOD VILLAS

800 W CHURCH ST BISHOPVILLE, SC 29010

SHEALY, HARRIETT H PH#: 803-484-5303

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1186 / 10/31/2009 Lee / Corporation

800 W CHURCH ST

BISHOPVILLE, SC 29010 COTTONWOOD VILLAS INC

Total Number of Licensed Beds 71

Resident Beds: 71 Resident Rooms 43
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

COUNTRY CHRISTIAN CARE INC

207 FARM HOUSE LN FAIR PLAY, SC 29643

ZABOROWSKI, TINA M PH#: 864-972-1072

Fac. Cont. Email: DAN-TIAZ@PEOPLEPC.COM

Certified For Alzheimers Care

CRC-1041 / 07/31/2009

Oconee / Corporation 207 FARM HOUSE LN

FAIR PLAY, SC 29643

COUNTRY CHRISTIAN CARE INC

Total Number of Licensed Beds 14

Resident Beds: 14 Resident Rooms 14 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

COUNTRY COMFORT COMMUNITY RESIDENTIAL CARE FACILITY

204 JOE APREE CIR BLYTHEWOOD, SC 29016 COUNTS, CLIFFORD A PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1467 / 02/28/2010 Richland / Sole Proprietorship

PO BOX 353

BLYTHEWOOD, SC 29016-0353

CLIFFORD ALAN COUNTS

CRC-0858 / 01/31/2010

125 ZION SCHOOL RD

Pickens / Corporation

EASLEY, SC 29641

Total Number of Licensed Beds

Resident Rooms Resident Beds: 5 4 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

COUNTRYSIDE PARK

Certified For

125 ZION SCHOOL RD EASLEY, SC 29642

ELLIOTT, MARK A PH#: 864-859-0167 Fac. Cont. Email: No Fac. Cont. Email on record

EMERITUS CORPORATION

Certified For Total Number of Licensed Beds 66

> Resident Beds: 66 **Resident Rooms** 48 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

COUNTRYSIDE VILLAGE

706 PELZER HWY EASLEY, SC 29642

HAIR, BRANDON PH#: 864-675-0220

Fac. Cont. Email: BELLAIREPLACE-ED@EMERITUS.COM

CRC-0857 / 01/31/2010 Pickens / Corporation

3131 ELLIOTT AVE, STE 500

SEATTLE, WA 98121 **EMERITUS CORPORATION**

Certified For Alzheimers Care

Alzheimers Unit

Total Number of Licensed Beds 85

Resident Beds: 85 **Resident Rooms** 47 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

COUNTRYWOOD ASSISTED LIVING

1645 RIDGE RD HOPKINS, SC 29061

HAYNES, LAWRENCE A PH#: 803-776-3873

Fac. Cont. Email: LHAYNES@STERLING-HEALTH.COM

CRC-1465 / 11/30/2009

Richland / Ltd. Liability

HOPKINS, SC 29061

1645 RIDGE RD

Certified For Total Number of Licensed Beds 26

> Resident Beds: 26 **Resident Rooms** 13 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

COUNTRYWOOD NURSING CENTER LLC

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1265 / 02/28/2010

Richland / Corporation

COURTLYN HOUSE

10508 GARNERS FERRY RD EASTOVER, SC 29044

CANTEY, WILLIE B PH#: 803-695-2158

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

EASTOVER, SC 29044 COURTLYN HOUSE INC

10508 GARNERS FERRY RD

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

COVENANT PLACE

2825 CARTER RD SUMTER, SC 29150

LINDER, RISLEY E PH#: 803-469-7007

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0758 / 03/31/2010

Sumter / Non-Profit Corporation

2825 CARTER ST SUMTER, SC 29150

COVENANT PLACE OF SUMTER INC

Total Number of Licensed Beds 70

Resident Beds: 70 Resident Rooms 52 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CUMBERLAND HILLS

3215 WISE CREEK LN AIKEN, SC 29801-0000

STEWART, JASON A PH#: 803-643-0073

Fac. Cont. Email: KARMSTRONG@MARRINSON.COM

Certified For Alzheimers Care

CRC-1121 / 09/30/2009 Aiken / Corporation 3215 WISE CREEK LN AIKEN, SC 29801

CUMBERLAND HILLS

Total Number of Licensed Beds 34

Resident Beds: 34 Resident Rooms 24
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CUMMINGS COMMUNITY RESIDENTIAL CARE HOME

2606 STARK LN

NORTH CHARLESTON, SC 29405

CUMMINGS, OLYMPIA W PH#: 843-747-7088

Fac. Cont. Email: OCUMMINGS03@COMCAST.NET

Certified For

CRC-0891 / 10/31/2009

Charleston / Sole Proprietorship

PO BOX 7

GOOSE CREEK, SC 29445 OLYMPIA W CUMMINGS

Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms 2
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CURAMENG RESIDENTIAL HOME CARE

2021 COSGROVE AVE

NORTH CHARLESTON, SC 29405

REYES, MILAGROS L PH#: 843-566-1266

Fac. Cont. Email: CURAMEFT@YAHOO.COM

Certified For

Charleston / Corporation 2021 COSGROVE AVE

CRC-1187 / 11/30/2009

NORTH CHARLESTON, SC 29405

JFJ INC

Total Number of Licensed Beds

Resident Rooms Resident Beds: 8 3 Staff Beds: 2 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

CYPRESS HOUSE

205 MIDLAND PKWY SUMMERVILLE, SC 29485

CARLETON, KELLY PH#: 000-000-0000

Fac. Cont. Email: ADMIN.OA.SC@PALMETTOLTC.COM

Certified For Alzheimers Care

CRC-1411 / 11/30/2009

Dorchester / Corporation 205 MIDLAND PKWY

SUMMERVILLE, SC 29485

ASSISTED LIVING CONCEPTS INC

Total Number of Licensed Beds 44

Resident Beds: 44 **Resident Rooms** 39 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

DALTONS CMC RESIDENTIAL CARE FACILITY

1231 EUTAW ST

ORANGEBURG, SC 29115

MYERS, DEBORAH J PH#: 803-937-6155

Fac. Cont. Email: CRDALTON_29115@HOTMAIL.COM

CRC-1447 / 07/31/2009

Orangeburg / Sole Proprietorship

1231 EUTAW ST

ORANGEBURG, SC 29115 CHERYL GIBSON-DALTON

Certified For Total Number of Licensed Beds

> **Resident Beds:** 5 **Resident Rooms** 3 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

DAVIDSON STREET COMMUNITY RESIDENCE

313 DAVIDSON ST CLINTON, SC 29325

GODFREY, ANDRIKA PH#: 864-682-2314

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1420 / 12/31/2009

Laurens / Non-Profit Corporation

313 DAVIDSON ST CLINTON, SC 29325

LAURENS COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Total Number of Licensed Beds

Resident Beds: 8 Resident Rooms 8 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

DAVIS COMMUNITY CARE HOME 2306 HEYWARD BROCKINGTON RD

COLUMBIA, SC 29203

DAVIS, ELIJAH PH#: 803-754-5677

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0240 / 07/31/2009 Richland / Partnership

PO BOX 3273

COLUMBIA, SC 29230

THOMASENA DAVIS EUGENIA M EARGLE & ELIJAH DAVIS

Certified For Total Number of Licensed Beds 19

Resident Beds: 19 Resident Rooms 8
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

DAYSPRING ASSISTED LIVING

5146 TOWLES RD HOLLYWOOD, SC 29449

MARSHALL, YASSAMIN B PH#: 843-889-9757

Fac. Cont. Email: DAYSPRINGSC@YAHOO.COM

Certified For Alzheimers Care

CRC-1385 / 04/30/2009 Charleston / Ltd. Liability

5146 TOWLES RD

HOLLYWOOD, SC 29449

DAYSPRING ASSISTED LIVING LLC

Total Number of Licensed Beds 16

Resident Beds: 16 Resident Rooms 12 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

DIANA AND CLARENCE BROWN'S HOME

1591 AMELIA ST NE

ORANGEBURG, SC 29115

BROWN, DIANA L PH#: 803-539-0608

Fac. Cont. Email: DDIANBROW@AIL.COM

Certified For

CRC-0693 / 11/30/2009

Orangeburg / Corporation 1591 AMELIA ST NE

ORANGEBURG, SC 29115 BROWN PRODUCTIONS INC

Total Number of Licensed Beds 23

Resident Beds: 23 Resident Rooms 7
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

DILLON COMMUNITY RESIDENCE

500 S 14TH AVE

Certified For

DILLON, SC 29536-2072

MITCHELL, MARCELLA A PH#: 843-774-6775

Fac. Cont. Email: GKEITH@MDDSN.ORG

CRC-1377 / 04/30/2010

Dillon / County PO BOX 2072

DILLON, SC 29536

MARION-DILLON COUNTY BOARD OF DISABILITIES AND SPECIAL

NEEDS

Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration
County/Ownership Type
Mailing Address
Licensee

DIVINE MANOR ASSISTED LIVING CENTER

2210 OAK POND RD

ROCK HILL, SC 29730-7958

AFAM, DORIS O PH#: 803-329-5902

Fac. Cont. Email: DIVINEMANOR@COMPORIUM.NET

CRC-1361 / 07/31/2009

York / Limited Liability Company (multiple member)

2210 OAK POND RD ROCK HILL, SC 29730

DIVINE NURSE CONSULTANT LLC

Certified For Total Number of Licensed Beds 32

Resident Beds: 32 Resident Rooms 16
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

DIXON'S COMMUNITY CARE HOME

1456 DIXON RD

ELGIN, SC 29045

DIXON, JAMES M PH#: 803-729-4309

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0934 / 09/30/2009

Kershaw / Corporation

PO BOX 306

ELGIN, SC 29045

DIXON'S COMMUNITY CARE HOME INC

Certified For

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

DORCAS RESIDENTIAL CARE I

1131 BEXLEY ST

NORTH CHARLESTON, SC 29405

RELLORA, JESUS N PH#: 843-746-9800

Fac. Cont. Email: JNAVEARELLORA@NETZERO.NET

CRC-1251 / 11/30/2009 Charleston / Partnership

PO BOX 61870

NORTH CHARLESTON, SC 29419 JESUS N AND WILHELMINA C RELLORA

Certified For

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 1 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

DORCAS RESIDENTIAL CARE II

1133 BEXLEY ST

NORTH CHARLESTON, SC 29405

RELLORA, JESUS N PH#: 843-747-4800

Fac. Cont. Email: JNAVEARELLORA@NETZERO.NET

CRC-1252 / 11/30/2009

Charleston / Partnership

PO BOX 61870

NORTH CHARLESTON, SC 29419 JESUS N AND WILHELMINA C RELLORA

Certified For

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1078 / 04/30/2010

Clarendon / Partnership

MANNING, SC 29102

DORCH COMMUNITY RESIDENTIAL CARE

3955 GREELEYVILLE HWY MANNING, SC 29102

SCOTT, WILLA MAE PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

PO BOX 122

EVELYN DORCH LEWIS AND ANDREW DORCH

Total Number of Licensed Beds 13

Resident Beds: 13 Resident Rooms 6 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

DOWDY'S COMMUNITY CARE HOME #2

4609 ARLINGTON ST COLUMBIA, SC 29203

DOWDY, ANNIE R PH#: 803-786-2105 Fac. Cont. Email: No Fac. Cont. Email on record

> **Total Number of Licensed Beds** 9

CRC-0173 / 08/31/2009

4609 ARLINGTON ST

ANNIE R DOWDY

COLUMBIA, SC 29203

Richland / Sole Proprietorship

Resident Beds: 9 **Resident Rooms** 4 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

Certified For

DREAMLAND RESIDENTIAL CARE

6941 NORTH RD NORTH, SC 29112

WRIGHT, DELORES M PH#: 803-533-7492

Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds

CRC-0795 / 12/31/2009

6941 NORTH RD

NORTH, SC 29112

DELORES M WRIGHT

Orangeburg / Sole Proprietorship

Resident Beds: 5 **Resident Rooms** 4 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

Certified For

DUBOSE COMMUNITY CARE FACILITY NO I

505 LYTTLETON ST CAMDEN, SC 29020

DUBOSE, GLORIA Y PH#: 803-713-1379

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0970 / 01/31/2010

505 LYTTLETON ST

CAMDEN, SC 29020

GLORIA DUBOSE

Kershaw / Sole Proprietorship

Resident Beds: 5 **Resident Rooms** 3 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

Certified For Total Number of Licensed Beds

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April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

E M WILLIAMS COMMUNITY CARE HOME #2

115 SUMNER ST

GREENVILLE, SC 29601-0000

HALLUMS, ELIZABETH A PH#: 864-233-4899 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0607 / 11/30/2009

Greenville / Sole Proprietorship PO BOX 6025 STATION B GREENVILLE, SC 29606

ELIZABETH ANN HALLUMS

Total Number of Licensed Beds

Resident Beds: 8 **Resident Rooms** 5 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

E M WRIGHT CARE CENTER

120 ARLINGTON AVE GREENVILLE, SC 29601

WRIGHT, ESSIE PH#: 864-235-4936

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0745 / 12/31/2002 (Renewal Pending)

Greenville / Sole Proprietorship

120 ARLINGTON AVE GREENVILLE, SC 29601

ESSIE M WRIGHT

Total Number of Licensed Beds 6

Resident Beds: 6 **Resident Rooms** 0 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

E M WRIGHT CARE CENTER #2

3 S LEACH ST

GREENVILLE, SC 29601

WRIGHT, ESSIE M PH#: 864-235-4971

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1150 / 08/17/2000 (Renewal Pending)

Greenville / Sole Proprietorship

PO BOX 492

GREENVILLE, SC 29602-0492

ESSIE M WRIGHT

Total Number of Licensed Beds 26

Resident Beds: 26 **Resident Rooms** n Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

EASLEY RETIREMENT CENTER

102 DOWLING ST

EASLEY, SC 29641-0736

OWENS, BERT J PH#: 864-859-3722

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0359 / 02/28/2010

Pickens / Corporation

PO BOX 736

EASLEY, SC 29641

WEST END RETIREMENT CENTER INC

Certified For Total Number of Licensed Beds 28

> Resident Beds: 28 Resident Rooms 11 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

EDEN GARDENS - AIKEN 1385 SILVER BLUFF RD AIKEN, SC 29803-8860 LARKE, ANGIE C PH#: CRC-1316 / 11/30/2009 Aiken / Corporation 1385 SILVER BLUFF RD AIKEN, SC 29803

Fac. Cont. Email: No Fac. Cont. Email on record

TWENTY TWO PACK MANAGEMENT CORPORATION

Certified For Alzheimers Care

Alzheimers Unit

Total Number of Licensed Beds 110

Resident Beds: 110 Resident Rooms 71
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

EDEN GARDENS - COLUMBIA

120 FAIRFOREST RD COLUMBIA, SC 29212

LYNN, NICK PH#: 803-781-2243

Fac. Cont. Email: No Fac. Cont. Email on record

Richland / Corporation 120 FAIRFOREST RD COLUMBIA, SC 29212

CRC-1315 / 11/30/2009

TWENTY TWO PACK MANAGEMENT CORPORATION

Certified For Alzheimers Care

Alzheimers Unit

Total Number of Licensed Beds 66

Resident Beds: 66 Resident Rooms 48
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

EDEN GARDENS - ROCK HILL

1611 CONSTITUTION BLVD

ROCK HILL, SC 29732 LINGERFELT, SHAY B PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1290 / 11/30/2009

York / Corporation

1611 CONSTITUTION BLVD

ROCK HILL, SC 29732

TWENTY TWO PACK MANAGEMENT CORPORATION

Certified For Alzheimers Care

Alzheimers Unit

Total Number of Licensed Beds 110

Resident Beds: 110 Resident Rooms 72 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

EDEN TERRACE OF SPARTANBURG

2780 E MAIN ST

SPARTANBURG, SC 29662

BROWN, CINDY B PH#: 864-579-7387

Fac. Cont. Email: CWATSON@ARBORCOMPANY.COM

Certified For Alzheimers Unit

CRC-1213 / 05/31/2009 Spartanburg / Ltd. Liability

2780 E MAIN ST

SPARTANBURG, SC 29307 BRISTOL SPARTANBURG L L C

Total Number of Licensed Beds 115

Resident Beds: 115 Resident Rooms 98
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1291 / 11/30/2009

Charleston / Corporation

2030 CHARLIE HALL BLVD

CHARLESTON, SC 29414

TWENTY TWO PACK MANAGEMENT CORPORATION

EDENBROOK OF CHARLESTON 2030 CHARLIE HALL BLVD CHARLESTON, SC 29414-0000

NARAINE, ROBYN T PH#: 000-000-0000

Fac. Cont. Email: PINEWOODHOUSE@ALCCO.COM

Total Number of Licensed Beds 100

Resident Beds: 100 **Resident Rooms** Staff Beds: 0 Other Beds: 0

0 Staff Rooms: Other Rooms: 0

84

ELLIOTT'S RESIDENTIAL CARE HOME

Certified For Alzheimers Unit

2432 LANDSDOWNE RD BOWMAN, SC 29018

LEVINS, DEBORAH Y PH#: 803-829-3348

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0272 / 10/31/2009 Orangeburg / Corporation

PO BOX 265

BOWMAN, SC 29018

ELLIOTT'S RESIDENTIAL CARE HOME INC

Certified For Total Number of Licensed Beds 7

> **Resident Beds:** 7 **Resident Rooms** 3 Staff Beds: 1 Staff Rooms: 1 Other Rooms: Other Beds: 0 0

ELMCROFT OF FLORENCE

3006 HOFFMEYER RD FLORENCE, SC 29501

ADEIMY, GINGER S PH#: 843-292-0012

Fac. Cont. Email: GADEIMY@SENIORCARE-CORP.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1422 / 10/31/2009 Florence / Ltd. Liability

9510 ORMSBY STATION RD #101

LOUISVILLE, KY 40223

EC FLORENCE OPERATIONS LLC

Total Number of Licensed Beds 82

Resident Beds: 82 **Resident Rooms** 76 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

EMERALD GARDENS OF GREENWOOD

201 OVERLAND DR

GREENWOOD, SC 29646

PATTERSON, MICHAEL L PH#: 864-953-2174

Fac. Cont. Email: MPATTERSON@PREMIERS1.COM

Certified For Alzheimers Unit

CRC-1378 / 03/31/2010 Greenwood / Ltd. Liability 201 OVERLAND DR GREENWOOD, SC 29646

EDEN GARDENS OF GREENWOOD LLC

Total Number of Licensed Beds 66

Resident Beds: 66 **Resident Rooms** 48 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

EMERALD RCF I

2244 BROWNTOWN RD BISHOPVILLE, SC 29010

FORTUNE, ELLA R PH#: 803-428-5407

Fac. Cont. Email: TTHLL@DMH.STATE.SC.US

Certified For

CRC-1205 / 04/30/2010

Lee / State

2244 BROWNTOWN RD BISHOPVILLE, SC 29010

SANTEE-WATEREE COMMUNITY MENTAL HEALTH CENTER

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 5
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

EMERALD RCF II

2262 BROWNTOWN RD BISHOPVILLE, SC 29010

FORTUNE, ELLA R PH#: 803-428-6044

Fac. Cont. Email: TTHLL@DMH.STATE.SC.US

CRC-1206 / 04/30/2010

Lee / State

2262 BROWNTOWN RD BISHOPVILLE, SC 29010

SANTEE-WATEREE COMMUNITY MENTAL HEALTH CENTER

Certified For Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 5
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

EUGENIA'S RESIDENTIAL CARE FACILITY

2232 HEYWARD BROCKINGTON RD

COLUMBIA, SC 29203

DAVIS-EARGLE, EUGENIA M PH#: 803-786-1047

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0538 / 08/31/2009 Richland / Partnership

PO BOX 3273

COLUMBIA, SC 29230-3273

ELIJAH DAVIS THOMASENA DAVIS & EUGENIA M EARGLE

Certified For Total Number of Licensed Beds 23

Resident Beds: 23 Resident Rooms 13
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

EVELYN'S RESIDENTIAL CARE FACILITY

162 S MCQUEEN ST

FLORENCE, SC 29501

CUSAAC, EVELYN R PH#: 843-665-5751

Fac. Cont. Email: EVELYNCUSAAC@YAHOO.COM

Certified For

CRC-1164 / 05/31/2009

Florence / Sole Proprietorship

PO BOX 5846

FLORENCE, SC 29502 EVELYN R CUSAAC

Total Number of Licensed Beds 9

Resident Beds: 9 Resident Rooms 6
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0818 / 04/30/2009

Charleston / Corporation

EVERGREEN RESIDENTIAL CARE INC ANNEX II

1819 NORWOOD ST

NORTH CHARLESTON, SC 29405 LESESNE, GARY O PH#: 843-744-1249

Fac. Cont. Email: EVERGREEN1818@MSN.COM

Total Number of Licensed Beds

CHARLESTON, SC 29417

EVERGREEN RESIDENTIAL CARE INC

Resident Beds: 5 Staff Beds: 0 Other Beds: 0

PO BOX 31774

Resident Rooms 3 0 Staff Rooms: Other Rooms: 0

17

Certified For

EVERGREEN RESIDENTIAL CARE INC I

1612 EVERGREEN ST CHARLESTON, SC 29407

LESESNE, CLARA P PH#: 843-744-1249

Fac. Cont. Email: EVERGREEN1818@MSN.COM

Certified For

CRC-0026 / 03/31/2009 (Renewal Pending)

Charleston / Corporation

PO BOX 31774

CHARLESTON, SC 29417

EVERGREEN RESIDENTIAL CARE INC

Total Number of Licensed Beds 8

Resident Beds: 8 **Resident Rooms** 4 Staff Beds: 1 Staff Rooms: 1 Other Rooms: Other Beds: 0 0

EVERGREEN RESIDENTIAL CARE INC II

1818 NORWOOD ST

NORTH CHARLESTON, SC 29405

LESESNE, GARY O PH#: 843-744-1249

Fac. Cont. Email: EVERGREEN1818@MSN.COM

Certified For

CRC-0470 / 04/30/2009

Charleston / Corporation

PO BOX 31774

NORTH CHARLESTON, SC 29417 **EVERGREEN RESIDENTIAL CARE INC**

Total Number of Licensed Beds 51 Resident Beds: 51 **Resident Rooms**

Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

FAIR HAVENS MANOR

1917 COSGROVE AVE

NORTH CHARLESTON, SC 29405

MAGWOOD, ANDREA J PH#: 843-747-2593

Fac. Cont. Email: ANDREAJMAGWOOD@BELLSOUTH.NET

Certified For

CRC-0101 / 04/30/2009

Charleston / Sole Proprietorship

PO BOX 70028

NORTH CHARLESTON, SC 29415-0028

ANDREA J MAGWOOD

Total Number of Licensed Beds 20

Resident Beds: 20 **Resident Rooms** 8 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

FAITH HOPE AND CHARITY RETIREMENT

101 COE ST

ANDERSON, SC 29624

TOUCHTON, MARY S PH#: 864-226-0990

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0760 / 04/30/2010 Anderson / Sole Proprietorship

PO BOX 13866

ANDERSON, SC 29624 MARY SIMS TOUCHTON

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

FAITH SWEET HOME

2151 DORCHESTER RD

NORTH CHARLESTON, SC 29405-7992

ENCARNACION, FELICITAS B PH#: 843-552-7954

Fac. Cont. Email: ITASGANDA@NETZERO.NET

Certified For Alzheimers Care

CRC-1464 / 12/31/2009

Charleston / Sole Proprietorship

4704 LANDERWOOD CT

NORTH CHARLESTON, SC 29420

FELICITAS B ENCARNACION

Total Number of Licensed Beds 4

Resident Beds: 4 Resident Rooms 3
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

FAMILY RESIDENTIAL CARE HOME I

21 EDWARDS ST

SUMTER, SC 29150

WALTERS, MICHAEL A PH#: 803-775-9555

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1233 / 02/28/2010

Sumter / Sole Proprietorship

PO BOX 7658

SUMTER, SC 29150 MICHAEL A WALTERS

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

FAMILY RESIDENTIAL CARE HOME II

23 EDWARDS ST

SUMTER, SC 29150

WALTERS, MICHAEL A PH#: 803-775-9555

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1277 / 06/30/2009

Sumter / Sole Proprietorship

PO BOX 7658

SUMTER, SC 29150 MICHAEL A WALTERS

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 2
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

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DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

FARMINGTON COMMUNITY RESIDENCE

1269 CAMP RD

JAMES ISLAND, SC 29412

SIMMONS, CYNTHIA Y PH#: 843-762-9827

Fac. Cont. Email: DGOLDMINTZ@DSNCC.COM

Certified For

CRC-1370 / 01/31/2010 Charleston / State PO BOX 22708

CHARLESTON, SC 29413-2708

DISABILITIES BOARD OF CHARLESTON COUNTY

Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms 8
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

FIRST CHOICE HOME CARE FACILITY

2003 COSGROVE AVE

NORTH CHARLESTON, SC 29405

MABROUK, ABDELBAKI B PH#: 843-569-0025

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0742 / 10/31/2009 Charleston / Partnership 2003 COSGROVE AVE

NORTH CHARLESTON, SC 29405

D Q R CAMBA/N M CAMBA/G T MARTINEZ/P MARTINEZ/P PAJOTA

Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms 5
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

FITZGERALD'S RESIDENTIAL CARE FACILITY

813 S MCDUFFIE ST ANDERSON, SC 29624

SMITH, MICHAEL A PH#: 864-225-4711

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0338 / 01/31/2010

Anderson / Sole Proprietorship

813 S MCDUFFIE ST ANDERSON, SC 29624 DORIS FITZGERALD

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

FLANAGAN COMMUNITY CARE HOME

665 SHARPE RD

COLUMBIA, SC 29203

BRIGGS, MARY E PH#: 803-754-2136

Fac. Cont. Email: M-BRIGGS@BELLSOUTH.NET

Certified For

CRC-0314 / 11/01/2009

Richland / Sole Proprietorship

PO BOX 3283

COLUMBIA, SC 29230

LARRY C SLOAN

Total Number of Licensed Beds 9

Resident Beds: 9 Resident Rooms 4
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

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April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

FLORA'S RESIDENTIAL CARE FACILITY

906 S HARVIN ST SUMTER, SC 29150

YORK-HERRIOTT, LUCINDA PH#: 803-773-6882

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1293 / 04/30/2010 Sumter / Sole Proprietorship

PO BOX 2980

SUMTER, SC 29151

LUCINDA YORK-HERRIOTT

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

FLOWERS COMMUNITY RESIDENTIAL CARE

1930 CHANEY ST

COLUMBIA, SC 29204

FLOWERS, THEODORE PH#: 803-735-0920

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0376 / 03/31/2010

Richland / Sole Proprietorship

1930 CHANEY ST COLUMBIA, SC 29204 THEODORE FLOWERS

Total Number of Licensed Beds 11

Resident Beds: 11 Resident Rooms 6
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

FLOWERS RESIDENTIAL CARE FACILITY

855 WATTS HILL RD LUGOFF, SC 29078

FLOWERS, MARY C PH#: 803-438-2654

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-0297 / 11/30/2009

Kershaw / Sole Proprietorship

855 WATTS HILL RD LUGOFF, SC 29078 MARY C FLOWERS

Total Number of Licensed Beds 7

Resident Beds: 7 Resident Rooms 4
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

FOOTHILLS ASSISTED LIVING

999 W UNION RD

WEST UNION, SC 29696

STEWART, VIRGINIA B PH#: 864-638-4370

Fac. Cont. Email: FOOTHILLSMANOR@YAHOO.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1364 / 08/31/2009

Oconee / Corporation 999 W UNION RD

WEST UNION, SC 29696

CITE HEALTH MANAGEMENT SERVICES INC

Total Number of Licensed Beds 76

Resident Beds: 76 Resident Rooms 40 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1230 / 12/31/2009

Oconee / Corporation

SENECA, SC 29678

927 E N 1ST ST

FOR A SEASON ASSISTED LIVING

927 E N 1ST ST SENECA, SC 29678

Certified For

ARNOLD, MARTHA B PH#: 864-886-0083

Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds 5

JAMES ARNOLD STEVENS INC

Resident Beds: 5 Resident Rooms 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

FOREST VIEW MANOR RETIREMENT CENTER

141 CALLISON HWY MCCORMICK, SC 29835

NIXON, KENNETH M PH#: 803-637-5857

Fac. Cont. Email: KMNIXON62@AOL.COM

Certified For Alzheimers Care

CRC-0500 / 11/30/2009 Edgefield / Corporation 141 CALLISON HWY MCCORMICK, SC 29835

HILLSIDE INC

Total Number of Licensed Beds 40

Resident Beds: 40 Resident Rooms 24
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

FOUNTAINSIDE ELDERCARE INN

709 QUILLEN AVE

FOUNTAIN INN, SC 29644

PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1321 / 12/31/2008 (Renewal Pending)

Greenville / Ltd. Liability

PO BOX 805

FOUNTAIN INN, SC 29644 FOUNTAINSIDE PROPERTIES LLC

Certified For Alzheimers Care

Alzheimers Unit

Total Number of Licensed Beds 78

Resident Beds: 78 Resident Rooms 54
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

FRANKE HOME

1885 RIFLE RANGE RD

MT PLEASANT, SC 29464-0000

STOLL, SANDRA A PH#: 843-856-4700

Fac. Cont. Email: SSTOLL@FRANKEATSEASIDE.ORG

Certified For Alzheimers Care

Alzheimers Unit

CRC-1082 / 09/30/2009 Charleston / Corporation 1885 RIFLE RANGE RD

MT PLEASANT, SC 29464

LUTHERAN HOMES OF SOUTH CAROLINA INC

Total Number of Licensed Beds 86

Resident Beds: 86 Resident Rooms 62
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0107 / 10/31/2009

CAMDEN, SC 29020

FRIENDSHIP COMMUNITY CARE HOME

298 DOBY ST

CAMDEN, SC 29020

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CAMPBELL-JENKINS, SHIRLEY PH#: 803-432-5329

298 DOBY ST

SHIRLEY D CAMPBELL-JENKINS

Kershaw / Sole Proprietorship

Total Number of Licensed Beds

Resident Rooms Resident Beds: 7 4 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

GALA HAVEN

224 WARD LOOP HEMINGWAY 29554

MARSH, DOROTHEAL C PH#: 843-558-6295

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1264 / 04/30/2009

Georgetown / State 224 WARD LOOP

HEMINGWAY, SC 29554

WACCAMAW CENTER FOR MENTAL HEALTH

Total Number of Licensed Beds 5

Resident Beds: 5 **Resident Rooms** 5 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

GARDEN HOUSE

201 EDGEBROOK DR ANDERSON, SC 29621

BRADLEY-GUIBAULT, KATHLEEN PH#: 864-964-5668

Fac. Cont. Email: No Fac. Cont. Email on record

Alzheimers Unit

CRC-1437 / 02/28/2010 Anderson / Ltd. Liability

201 EDGEBROOK DR ANDERSON, SC 29621

ANDERSON SENIOR LIVING PARTNERS LLC

Certified For Alzheimers Care Total Number of Licensed Beds 60

> Resident Beds: 60 45 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Rooms: 0

Other Beds: 0

GARDENS AT EASTSIDE

275 COMMONWEALTH DR GREENVILLE, SC 29615

FORD, JANE A PH#: 864-329-1200

Fac. Cont. Email: JHARPER@ARBORCOMPANY.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1222 / 08/31/2009

Greenville / Ltd. Liability 275 COMMONWEALTH DR

GREENVILLE, SC 29615

EASTSIDE ASSISTED LIVING L L C

Total Number of Licensed Beds 83

Resident Beds: 83 **Resident Rooms** 71 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0431 / 05/31/2009

PO BOX 15101

GENE E JONES

PO BOX 15101

GENE E JONES

Florence / Sole Proprietorship

FLORENCE, SC 29506-0101

GENE'S RESIDENTIAL CARE #1

607 W SUMTER ST

Certified For

FLORENCE, SC 29501-2458

SINGLETARY, MARY JANE PH#: 843-389-9022

Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds

Resident Beds: 6 **Resident Rooms** 4 Staff Beds: 0 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

CRC-0482 / 02/28/2009 (Renewal Pending)

GENE'S RESIDENTIAL CARE FACILITY #3

1312 W EVANS ST FLORENCE, SC 29506

SINGLETARY, MARY JANE PH#: 843-389-9022

Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds g

FLORENCE, SC 29506

Florence / Sole Proprietorship

Resident Beds: 9 **Resident Rooms** 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

Certified For

GENERATIONS OF BATESBURG INC

111 GENERATIONS BLVD BATESBURG, SC 29006

NIX, HAMMIE R PH#: 803-532-8428

Fac. Cont. Email: No Fac. Cont. Email on record

GENERATIONS OF BATESBURG INC

111 GENERATIONS BLVD

BATESBURG, SC 29006

CRC-0647 / 09/30/2009

Lexington / Corporation

Certified For Total Number of Licensed Beds 88

> Resident Beds: 88 **Resident Rooms** 58 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

GENERATIONS OF CHAPIN INC

431 E BOUNDARY ST CHAPIN, SC 29036

SLICE, TIMOTHY H PH#: 803-345-1911

Certified For Alzheimers Care

Fac. Cont. Email: TIM@GENERATIONSOFCHAPIN.COM

GENERATIONS OF CHAPIN INC Total Number of Licensed Beds 64

CRC-1128 / 10/31/2009

Lexington / Corporation

431 E BOUNDARY ST

CHAPIN, SC 29036

Resident Beds: 64 Resident Rooms 54 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

GENERATIONS OF MONETTA L L C

77 CATO RD

MONETTA, SC 29105

TISDALE, SHAWNTA T PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0876 / 10/31/2009 Aiken / Ltd. Liability

PO BOX 96

MONETTA, SC 29105-0096 GENERATIONS OF MONETTA L L C

Total Number of Licensed Beds 22

Resident Beds: 22 Resident Rooms 14
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

GOD'S HAVEN OF REST

516 BELVEDERE CLEARWATER RD BELVEDERE, SC 29841-2583 AYERS, HAZEL L PH#: 803-279-1129

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1237 / 12/31/2009

Aiken / Sole Proprietorship

516 BELVEDERE CLEARWATER RD

BELVEDERE, SC 29841-2583

HAZEL LEIGH AYERS

Total Number of Licensed Beds 9

Resident Beds: 9 Resident Rooms 5
Staff Beds: 3 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

GOLDEN YEARS

139 SEMINOLE ST

ORANGEBURG, SC 29115

SMITH, JIMI LYN PH#: 803-531-4386

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0333 / 11/30/2009

Orangeburg / Sole Proprietorship

PO BOX 1465

ORANGEBURG, SC 29116

LYNN P SMITH

Total Number of Licensed Beds 15

Resident Beds: 15 Resident Rooms 8
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

GOOD SAMARITAN RESIDENTIAL CARE

1356 BUBZY RD

KINGSTREE, SC 29556

DUROUSSEAU, MATTIE H PH#: 843-382-3530

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1015 / 05/31/2009

Williamsburg / Corporation

1356 BUBZY RD

KINGSTREE, SC 29556

GOOD SAMARITAN RESIDENTIAL CARE FACILITY INC

Certified For

Total Number of Licensed Beds 9

Resident Beds: 9 Resident Rooms 3
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

GOOSE CREEK MANOR #1

104 MARILYN ST

GOOSE CREEK, SC 29445

DEDIOS, LETICIA G PH#: 843-572-7442

Fac. Cont. Email: GOOSECREEKMANOR@AOL.COM

Certified For

Berkeley / Corporation 104 MARILYN ST

CRC-0639 / 06/30/2009

GOOSE CREEK, SC 29445 NL & JR INCORPORATED

Total Number of Licensed Beds 7

Resident Beds: 7 **Resident Rooms** 4 Staff Beds: 2 2 Staff Rooms: Other Beds: 0 Other Rooms: 0

GOOSE CREEK MANOR #2

104 MARILYN ST

GOOSE CREEK, SC 29445

DEDIOS, LETICIA G PH#: 843-572-7442

Fac. Cont. Email: GOOSECREEKMANOR@AOL.COM

Certified For

CRC-0762 / 04/30/2010

Berkeley / Corporation

104 MARILYN ST GOOSE CREEK, SC 29445

NL & JR INCORPORATED

Total Number of Licensed Beds 36

Resident Beds: 36 **Resident Rooms** 16 Staff Beds: 2 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

GRACE RESIDENTIAL CARE FACILITY INC

6534 CAROLINA HWY

DENMARK, SC 29042

DAVIS, BERNESTINE C PH#: 803-793-3423

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0584 / 08/31/2009 Bamberg / Corporation

PO BOX 326

DENMARK, SC 29042-0326

GRACE RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds 22 Certified For Alzheimers Care

> Resident Beds: 22 **Resident Rooms** 9 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

GREENE'S RESIDENTIAL CARE FACILITY

23 KENDRICK ST

SUMTER, SC 29150

GREENE, CARL PH#: 803-778-2780

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0665 / 01/31/2010

Sumter / Partnership

142 PERKINS AVE

SUMTER, SC 29150

CARL AND SHIRLEY GREENE

Total Number of Licensed Beds 21

Resident Beds: 21 **Resident Rooms** 10 Staff Beds: 0 Staff Rooms: 0

0

Other Beds: 0 Other Rooms:

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

GREENE'S RESIDENTIAL CARE II

28 S MAGNOLIA ST SUMTER, SC 29150

GREENE, CARL PH#: 803-778-2780

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1126 / 10/31/2009

Sumter / Sole Proprietorship 142 PERKINS AVE

SUMTER, SC 29150

CARL GREENE

Total Number of Licensed Beds 12

CRC-0073 / 03/31/2010

GREENVILLE, SC 29606-8467

Greenville / State

PO BOX 17467

Resident Beds: 12 Resident Rooms 5
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

GREENVILLE COMMUNITY RESIDENCE

158 CAVALIER DR

GREENVILLE, SC 29606-7467

WOJACK, DAVID C PH#: 864-277-0584

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Total Number of Licensed Beds 12

Resident Beds: 12 Resident Rooms 12 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

GREENVILLE COUNTY DISABILITIES & SPECIAL NEEDS BOARD

GREENVILLE GLENCRC-0887 / 12/31/2009
1101 GARLINGTON RD
Greenville / Limited Liability

GREENVILLE, SC 29615 CONNELLY, REATHA L PH#: 864-627-8700

Fac. Cont. Email: MANNINGHOUSE@ALCCO.COM

Certified For Total Number of Licensed Beds 44

Resident Beds: 44 Resident Rooms 36
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

GREENVILLE PLACE

2006 PELHAM RD GREENVILLE, SC 29615

PIZZOLA, KITTY J PH#: 864-288-3331

Fac. Cont. Email: GPED@CHARTERINTERNET.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1402 / 11/30/2009 Greenville / Corporation 2006 PELHAM RD

BEACON PULLIAM LLC

GREENVILLE, SC 29615

CSL LEASECO INC

Total Number of Licensed Beds 153

Resident Beds: 153 Resident Rooms 86
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

Certified For

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-0237 / 09/30/2009

Greenville / State

PO BOX 17467

GREER COMMUNITY RESIDENCE

112 S BEVERLY LN GREER, SC 29651-1738 MORTON, TAMARA L PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds 12

GREENVILLE, SC 29606

Resident Beds: 12 **Resident Rooms** 12 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

GREENVILLE COUNTY DISABILITIES & SPECIAL NEEDS BOARD

GREGORY'S COMMUNITY CARE #5 - MALONE HOUSE

2413 FORK SHOALS RD PIEDMONT, SC 29673

GREGORY, JOYCE C PH#: 864-277-2269 Fac. Cont. Email: LGRIKARD@HOTMAIL.COM

Certified For

CRC-0558 / 01/31/2010

Greenville / Sole Proprietorship

PO BOX 637

SIMPSONVILLE, SC 29681

JOYCE C GREGORY

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

GREGORY'S COMMUNITY CARE #6 - HOWELL HOUSE

2409 FORK SHOALS RD PIEDMONT, SC 29673

GREGORY, JOYCE C PH#: 864-277-1852

Fac. Cont. Email: LGRIKARD@HOTMAIL.COM

CRC-0556 / 01/31/2010

Greenville / Sole Proprietorship

PO BOX 637

SIMPSONVILLE, SC 29681

JOYCE C GREGORY

Certified For Total Number of Licensed Beds 10

> Resident Beds: 10 **Resident Rooms** 4 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

GREGORY'S COMMUNITY CARE #7 - CRAVEN HOUSE

10 FERGUESON RD PIEDMONT, SC 29673

GREGORY, JOYCE C PH#: 864-277-0996

Fac. Cont. Email: LGRIKARD@HOTMAIL.COM

Certified For

CRC-0555 / 01/31/2010

Greenville / Sole Proprietorship

PO BOX 637

SIMPSONVILLE, SC 29681

JOYCE C GREGORY

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

GREGORY'S COMMUNITY CARE #8 - METZ HOUSE

18 FERGERSON RD PIEDMONT, SC 29673

GREGORY, OYCE C PH#: 864-277-8506

Fac. Cont. Email: LGRIKARD@HOTMAIL.COM

Certified For

CRC-0557 / 01/31/2010

Greenville / Sole Proprietorship

PO BOX 637

SIMPSONVILLE, SC 29681

JOYCE C GREGORY

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 4 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

GUARDIAN ANGELS RESIDENTIAL CARE

2126 SUCCESS ST

NORTH CHARLESTON, SC 29405-7992 JANKE, BONIFACIA E PH#: 843-744-0448

Fac. Cont. Email: BIGB1959@COMCAST.NET

CRC-1049 / 11/30/2009

Charleston / Corporation 2126 SUCCESS ST

NORTH CHARLESTON, SC 29405 **GUARDIAN ANGELS ASSISTED LIVING INC**

Certified For Total Number of Licensed Beds 18

> Resident Beds: 18 **Resident Rooms** 6 2 Staff Beds: 2 Staff Rooms: Other Rooms: Other Beds: 0 0

HALL'S RESIDENTIAL CARE FACILITY

2860 NEW CUT RD

SPARTANBURG, SC 29303

HALL, DORIS G PH#: 864-439-7347

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0384 / 05/31/2009

Spartanburg / Partnership PO BOX 5393

SPARTANBURG, SC 29304-5393

DORIS G HALL & TINA HALL METCALF

Certified For Total Number of Licensed Beds 19

> Resident Beds: 19 19 **Resident Rooms Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

HAMMOND HOUSE

128 WALNUT LN

NORTH AUGUSTA, SC 29860

HOLLEY, SHANNON PH#: 803-441-8441

Certified For Alzheimers Care

Fac. Cont. Email: HAMMONDHOUSE@ALCCO.COM

NORTH AUGUSTA, SC 29860

ASSISTED LIVING CONCEPTS INC

Total Number of Licensed Beds 44

CRC-1405 / 11/30/2009

Aiken / Corporation

128 WALNUT LN

Resident Beds: 44 **Resident Rooms** 39 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0

0 Other Rooms:

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

HAMPTON STREET COMMUNITY RESIDENCE

425 HAMPTON ST DENMARK, SC 29042

PHAIRE, CARLTON PH#: 803-793-4093

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1296 / 06/30/2009

Bamberg / State PO BOX 4706

COLUMBIA, SC 29240-4706

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds

Resident Beds: 8 **Resident Rooms** 4 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

HANNAH RESIDENTIAL MANOR

3750 SHEMINALLY RD PAMPLICO, SC 29583

HART, PATRICIA W PH#: 843-493-2398

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-0712 / 05/31/2009

Florence / Corporation 3750 SHEMINALLY RD PAMPLICO, SC 29583

HART RETIREMENT MINISTERIES INC

Total Number of Licensed Beds 48

Resident Beds: 48 **Resident Rooms** 15 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

HARBISON HALL PARTNERS

534 WIL STEL RD COLUMBIA, SC 29210

COOK, BRIAN A PH#: 803-731-2000 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1107 / 06/30/2009 Richland / Partnership

534 WIL-STEL RD

COLUMBIA, SC 29210-3967 HARBISON HALL PARTNERS

Total Number of Licensed Beds 40

Resident Beds: 40 **Resident Rooms** 26 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

HAVEN IN THE SUMMIT

3 SUMMIT TERRACE COLUMBIA, SC 29229

WILLIAMS, LARA C PH#: 803-788-4633

Fac. Cont. Email: LWILLIAMS@SENIORLIVINGNOW.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1240 / 06/30/2009

Richland / Ltd. Liability 3 SUMMIT TERRACE

COLUMBIA, SC 29229

COLUMBIA/SUMMIT/RSL/HAVEN LLC

Total Number of Licensed Beds 60

Resident Beds: 60 **Resident Rooms** 48 Staff Beds: 0 Staff Rooms: 0 0

Other Beds: 0 Other Rooms:

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-1244 / 08/31/2009

Greenville / Ltd. Liability

GREENVILLE, SC 29605

355 BERKMANS LN

HAVEN IN THE VILLAGE AT CHANTICLEER

355 BERKMANS LN GREENVILLE, SC 29605

BUSH, CARSON PH#: 864-467-0031

Fac. Cont. Email: CBUSH@SENIORLVIINGNOWCOM

Certified For Alzheimers Care

Alzheimers Unit

RSL/HAVEN/GREENVILLE LLC Total Number of Licensed Beds 60

Resident Beds: 60 Resident Rooms 48 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

HAWTHORNE INN AT GREENVILLE ASSISTED LIVING COMMUNITY

20 HAWTHORNE PARK CT GREENVILLE, SC 29615

WINFIELD, JUDY A PH#: 864-288-6775

Fac. Cont. Email: ADMINGVILLE@CHARTERINTERNET.NET

Certified For Alzheimers Care

Alzheimers Unit

CRC-1396 / 06/30/2009

Greenville / Ltd. Liability

3723 FAIRVIEW INDUSTRIAL DR SE, STE 270

SALEM, OR 97302

GREENVILLE SENIOR LIVING LLC

Total Number of Licensed Beds 68

Resident Beds: 68 **Resident Rooms** 52 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

HAWTHORNE INN AT HILTON HEAD ASSISTED LIVING COMMUNITY

15 MAIN ST

HILTON HEAD ISLAND, SC 29926-4606

SAMPOGNA, LINDA E PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1397 / 06/30/2009 Beaufort / Ltd. Liability

3723 FAIRVIEW INDUSTRIAL DR SE, STE 270

SALEM, OR 97302

HILTON HEAD SENIOR LIVING LLC

Certified For Total Number of Licensed Beds 51

> Resident Beds: 51 **Resident Rooms** 39 **Staff Rooms:** 0 Staff Beds: 0 Other Beds: 0 Other Rooms: 0

HEATH SPRINGS RESIDENTIAL CARE CENTER INC

614 HART ST

HEATH SPRINGS, SC 29058-0503 JONES, BRENDA B PH#: 803-273-3227

Fac. Cont. Email: HSRCC@COMPORIUM.NET

CRC-0761 / 04/30/2010 Lancaster / Corporation

PO BOX 503

HEATH SPRINGS, SC 29058

HEATH SPRINGS RESIDENTIAL CARE CENTER INC

Certified For Alzheimers Care Total Number of Licensed Beds 64

> Resident Beds: 64 **Resident Rooms** 43 0 Staff Rooms: 0 Staff Beds: Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-1409 / 11/30/2009

Beaufort / Corporation

1624 PARIS AVE

HELENA HOUSE 1624 PARIS AVE PORT ROYAL, SC 29935

WELSH, LISANNE F PH#: 843-982-0233

Fac. Cont. Email: HELENAHOUSE@ALCCO.COM

Certified For Alzheimers Care

PORT ROYAL, SC 29935 ASSISTED LIVING CONCEPTS INC

Total Number of Licensed Beds 44

Resident Beds: 44 Resident Rooms 39 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

HELMS-GORDON RESIDENTIAL CARE HOME

714 FUNDERBURK ST FORT LAWN, SC 29714

GORDON, MELISSA K PH#: 803-872-4253

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0527 / 07/31/2009 Chester / Partnership 714 FUNDERBURK ST FORT LAWN, SC 29714

SARA E HELMS & MELISSA KAYE GORDON

Total Number of Licensed Beds 32

Resident Beds: 32 **Resident Rooms** 16 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

HERITAGE AT LOWMAN RESIDENTIAL CARE

2101 DUTCH FORK RD CHAPIN, SC 29036

DILLARD, DARLENE Y PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-0840 / 09/30/2009 Richland / Corporation

PO BOX 444

WHITE ROCK, SC 29177-0444

LUTHERAN HOMES OF SOUTH CAROLINA INC

Total Number of Licensed Beds 132

Resident Beds: 132 132 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

HERRIOTT'S RESIDENTIAL CARE FACILITY

114 LIME LN

SUMTER, SC 29150

DAVIS, CATHERINE PH#: 803-773-6882 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1013 / 06/30/2009

Sumter / Partnership

114 LIME LN

SUMTER, SC 29150

JOHN & LUCINDA HERRIOTT

Total Number of Licensed Beds 14

Resident Beds: 14 **Resident Rooms** 7 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1152 / 04/30/2009

COLUMBIA, SC 29223

2326 LOCUST RD

HILL COMMUNITY CARE FACILITY

1529 DIXON RD ELGIN, SC 29045

Certified For

HILL, ALICE F PH#: 803-408-1346

Fac. Cont. Email: No Fac. Cont. Email on record

ALICE F HILL

Kershaw / Sole Proprietorship

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms

Resident Beds: 10 Resident Rooms 6
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

HINTON STREET COMMUNITY CARE

608 HINTON ST

COLUMBIA, SC 29203

MILES, BETTY A PH#: 803-754-4039

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0782 / 08/31/2009

Richland / Sole Proprietorship

608 HINTON ST

COLUMBIA, SC 29203 JESSIE L NELSON

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

HITCHCOCK HOUSE

102 CREPE MYRTLE CT AIKEN, SC 29803

THRONTON, SUE C PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1412 / 11/30/2009 Aiken / Corporation 102 CREPE MYRTLE CT

AIKEN, SC 29803

ASSISTED LIVING CONCEPTS INC

Certified For Alzheimers Care Total Number of Licensed Beds 44

Resident Beds: 44 Resident Rooms 39
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

HOMEWOOD RESIDENCE AT CLEVELAND PARK

12 BOYCE AVE

GREENVILLE, SC 29601

TEEL PHD, ELIZABETH L PH#: 864-250-1188

Fac. Cont. Email: KBOWMAN@ARCLP.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1398 / 07/31/2009

Greenville / Ltd. Liability

12 BOYCE AVE

GREENVILLE, SC 29601 ARC CLEVELAND PARK LLC

Total Number of Licensed Beds 115

Resident Beds: 115 Resident Rooms 92 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-1460 / 12/31/2009

475 ROCHESTER HWY

Oconee / Ltd. Liability

SENECA, SC 29672 ALC TISSC LLC

INN AT SENECA

475 ROCHESTER HWY SENECA, SC 29672

HARBINSON, HEATHER M PH#: 864-886-0070 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

Total Number of Licensed Beds 50

Resident Beds: 50 **Resident Rooms** 40 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

IVORY'S LOVING CARE RESIDENTIAL FACILITY

2827 SPRUILL AVE

NORTH CHARLESTON, SC 29405 SANDERS, JUANITA PH#: 843-270-0787

Fac. Cont. Email: SISTERSANDERS@BELLSOUTH.NET

Certified For

CRC-1383 / 04/30/2010 Charleston / Partnership 2827 SPRUILL AVE

NORTH CHARLESTON, SC 29405 JUANITA SANDERS & GENEVA NELSON

Total Number of Licensed Beds 7

7 Resident Beds: **Resident Rooms** 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

IVY GROVE RESIDENTIAL CARE CENTER

483 LOCKHART LN

GAFFNEY, SC 29341-2841

MELEKWE, OBIAJULU PH#: 864-487-0869

Fac. Cont. Email: OSKARMANI@AOL.COM

CRC-1458 / 10/31/2009 Cherokee / Ltd. Liability

483 LOCKHART LN GAFFNEY, SC 29341

HARMONY RESIDENTIAL CARE CENTER LLC

Certified For Alzheimers Care Total Number of Licensed Beds 62

> Resident Beds: 62 **Resident Rooms** 32 Staff Beds: Staff Rooms: 0 O Other Beds: 0 Other Rooms: 0

J & T RESIDENTIAL CARE FACILITY

604 WAGON WHEEL RD HAMPTON, SC 29924

HIERS, BARBARA M PH#: 803-943-7177

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1094 / 05/31/2009 Hampton / Sole Proprietorship

604 WAGON WHEEL RD HAMPTON, SC 29924 THELMA S MYERS

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 6 3 Staff Rooms: 0 Staff Beds: Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

J B GUEST HOME

Certified For

7122 EDMOND HWY

PELION, SC 29123-0248

HARRISON, ANGELINE J PH#: 803-894-3309

Fac. Cont. Email: ANGELINEHARRISON@YAHOO.COM

CRC-1475 / 04/30/2010

Lexington / Limited Liability Company (multiple member)

PO BOX 278

PELION, SC 29123

SCAD CONSULTANTS USA LLC

Total Number of Licensed Beds 60

Resident Beds: 60 Resident Rooms 25 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

J C LARAES SOUTHWINDS ASSISTED LIVING COMMUNITY

308 HUMPHRIES RD RIDGEWAY, SC 29130

OWENS, JUDY W PH#: 803-438-4052

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1181 / 09/30/2009 Kershaw / Sole Proprietorship

PO BOX 1382

LUGOFF, SC 29078

ANNA OWENS

Certified For Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 5
Staff Beds: 2 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

J J RESIDENTIAL CARE

748 GREEN ST

ORANGEBURG, SC 29115

IRICK-BRUNSON, BARBARA W PH#: 803-539-2604

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0831 / 09/30/2009

Orangeburg / Sole Proprietorship

PO BOX 204

ORANGEBURG, SC 29116 BARBARA W IRICK-BRUNSON

Certified For Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 4
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

JADE COMMUNITY RESIDENTIAL CARE

3 & 5 CUNNINGTON ST CHARLESTON, SC 29405

VELASCO, JULIA M PH#: 843-853-0299

Fac. Cont. Email: No Fac. Cont. Email on record

-ac. Cont. Email. No Fac. Cont. Email on record

CRC-1123 / 10/31/2009

Charleston / Ltd. Liability

PO BOX 612

UNION, SC 29379

JADE COMMUNITY RESIDENTIAL CARE L L C

Certified For Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5
Staff Beds: 2 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1124 / 10/31/2009

Charleston / Ltd. Liability

JADE COMMUNITY RESIDENTIAL CARE II

7 A AND 7 B CUNNINGTON ST

CHARLESTON, SC 29405

WASHINGTON, ALFREDA PH#: 843-853-0299

Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds 10

Resident Beds: 10

UNION, SC 29379

PO BOX 612

Resident Rooms 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

JADE COMMUNITY RESIDENTIAL CARE L L C

JADE COMMUNITY RESIDENTIAL CARE III

9 CUNNINGTON ST

Certified For

CHARLESTON, SC 29405

WASHINGTON, ALFREDA PH#: 843-853-0299

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1125 / 10/31/2009 Charleston / Ltd. Liability

> PO BOX 612 UNION, SC 29379

JADE COMMUNITY RESIDENTIAL CARE L L C

Certified For Total Number of Licensed Beds 12

> Resident Beds: 12 **Resident Rooms** 5 Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

JENNI-LYNN ASSISTED LIVING COMMUNITY

915 HOOK AVE

WEST COLUMBIA, SC 29169

PUGH, KELLIE G PH#: 803-926-8600

Fac. Cont. Email: KPUGH@JENNILYNNSENIORLIVING.COM

CRC-1248 / 09/30/2009

Lexington / Ltd. Liability

915 HOOK AVE

WEST COLUMBIA, SC 29169

JENNI-LYNN ASSISTED LIVING L L C

Certified For Total Number of Licensed Beds 63

> Resident Beds: 63 53 **Resident Rooms** Staff Beds: 0 0 **Staff Rooms:** Other Beds: 0 Other Rooms: 0

JESSAMINE COMMUNITY RESIDENCE

143 JESSAMINE AVE

GEORGETOWN, SC 29440

BAKER, DAVID B PH#: 843-527-1390

Fac. Cont. Email: EKRAUSS@GCBDSN.COM

GEORGETOWN, SC 29442

CRC-1445 / 06/30/2009

Georgetown / County

PO BOX 1471

GEORGETOWN COUNTY BOARD OF DISABILITIES AND SPECIAL

NEEDS

Certified For Total Number of Licensed Beds

> Resident Beds: 8 Resident Rooms 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0932 / 06/30/2009

PO BOX 23494

Richland / Sole Proprietorship

COLUMBIA, SC 29224-3494

JOANNE'S COMMUNITY CARE HOME #1

5048 PERCIVAL RD ELGIN, SC 29045-9156

CALDWELL, JOANNE M PH#: 803-736-3860

Fac. Cont. Email: JOANNESCCH@AOL.COM

Certified For Alzheimers Care

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms Staff Beds: 0

CRC-0030 / 03/31/2010

Richland / Sole Proprietorship

JOANNE M CALDWELL

Staff Rooms:

Other Beds: 0

0 Other Rooms: 0

JOANNE'S COMMUNITY CARE HOME II

Certified For Alzheimers Care

756 FARROWOOD DR COLUMBIA, SC 29223

CALDWELL, JOANNE M PH#: 803-736-3094 Fac. Cont. Email: JOANNESCCH@AOL.COM

JOANNE M CALDWELL

COLUMBIA, SC 29224

Total Number of Licensed Beds Resident Beds:

PO BOX 23494

9 **Resident Rooms** 0 Staff Rooms:

5 0 0

4

Staff Beds: Other Beds:

0

Other Rooms:

g

JOLLY REST MORE

1488 GLOVER ST

ORANGEBURG, SC 29115

SMITH, JIMI LYN PH#: 803-531-4386

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0332 / 11/30/2009

Orangeburg / Sole Proprietorship

PO BOX 1465

ORANGEBURG, SC 29116

LYNN P SMITH

Total Number of Licensed Beds 10

Resident Beds: 10 3 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

JONES ELDERLY CARE

4197 ROWESVILLE RD ROWESVILLE, SC 29133

JONES, VERTELL PH#: 803-531-6220

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0618 / 01/31/2010

Orangeburg / Sole Proprietorship

124 SADDLEBROOK DR ORANGEBURG, SC 29118

VERTELL JONES

Total Number of Licensed Beds

Resident Beds: 5 **Resident Rooms** Staff Beds: 0 Staff Rooms: Other Beds:

0 0

0

Other Rooms:

3

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

JOY COMMUNITY CARE HOME

6800 DOBY DR

COLUMBIA, SC 29203

DOUGLAS, JONATHAN PH#: 803-754-3157

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0961 / 11/30/2009 Richland / Sole Proprietorship

PO BOX 25215

COLUMBIA, SC 29224 DEBORAH A SCOTT

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 4
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

KATURA SPRINGS ASSISTED LIVING

12488 OLD NUMBER SIX HWY EUTAWVILLE, SC 29048

LEE-HODGES, DANIELLE R PH#: 803-492-9080

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1301 / 05/31/2009
Orangeburg / Corporation
12488 OLD NUMBER SIX HWY
EUTAWVILLE, SC 29048

KATURA SPRINGS ASSISTED LIVING INC

Total Number of Licensed Beds 48

Resident Beds: 48 Resident Rooms 27
Staff Beds: 2 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

KIVA LODGE

200 CLAUDE BUNDRICK RD BLYTHEWOOD, SC 29016

HUNTER, KIMBERLY M PH#: 803-465-0907

Fac. Cont. Email: JJAY@MHA-SC.ORG

Certified For

CRC-1092 / 07/31/2009 Richland / Corporation 1823 GADSDEN ST COLUMBIA, SC 29201

MENTAL HEALTH AMERICA OF SOUTH CAROLINA

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 5
Staff Beds: 1 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

L & B CARE HOME

924 BARRWOODS RD SALUDA, SC 29138

BLEDSOE, LESA L PH#: 864-445-2494

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0530 / 07/31/2009 Saluda / Partnership 924 BARRWOODS RD SALUDA, SC 29138

LESA L BLEDSOE & FAYE LONG

Total Number of Licensed Beds 24

Resident Beds: 24 Resident Rooms 10 Staff Beds: 3 Staff Rooms: 2 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

L & M RESIDENTIAL HEALTH CARE FACILITY

2504 HWY 311

CROSS, SC 29436

TAYLOR, LINDA B PH#: 843-753-7098

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1426 / 02/28/2010 Berkeley / Ltd. Liability

2504 HWY 311 CROSS, SC 29436

L & M RESIDENTIAL HCF LLC

Total Number of Licensed Beds

Resident Rooms Resident Beds: 5 5 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

L SIMMONS RESIDENTIAL HOME

458 RACE ST

CHARLESTON, SC 29403

SIMMONS, LOUISE V PH#: 843-853-3179

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0928 / 04/30/2010

Charleston / Sole Proprietorship

458 RACE ST

CHARLESTON, SC 29403

LOUISE V SIMMONS

Total Number of Licensed Beds 5

Resident Beds: 2 5 **Resident Rooms** Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

LADIES COMMUNITY RESIDENCE

408 WEBB ST

CONWAY, SC 29526-0000

PROULX, ALYSON C PH#: 843-347-3010

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1449 / 07/31/2009

Horry / County 408 WEBB ST

CONWAY, SC 29526-0000

HORRY COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Certified For Total Number of Licensed Beds 8

> **Resident Beds:** 8 4 **Resident Rooms Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

LADSON'S RESIDENTIAL HOME CARE

1116 CAMP RD

CHARLESTON, SC 29412

LADSON, PAULINE M PH#: 843-406-0775

Fac. Cont. Email: No Fac. Cont. Email on record **Certified For**

CRC-1256 / 09/30/2009

Charleston / Sole Proprietorship

1116 CAMP RD

CHARLESTON, SC 29412

PAULINE LADSON

Total Number of Licensed Beds

Resident Beds: 5 **Resident Rooms** 2 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

LAFORREST COMMUNITY CARE CENTER INC

2841 BYPASS 127 LAURENS, SC 29360

MCDANIEL, SHEILA L PH#: 864-984-8001

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0681 / 05/31/2009 Laurens / Corporation

PO BOX 27

LAURENS, SC 29360-0027

LAFORREST COMMUNITY CARE CENTER INC

Total Number of Licensed Beds 34

Resident Beds: 34 Resident Rooms 16 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

LAKE WYLIE ASSISTED LIVING COMMUNITY

4877 CHARLOTTE HWY LAKE WYLIE, SC 29710

CURRENCE, JENNIFER L PH#: 803-569-4341

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1241 / 01/31/2010

York / Limited Liability Company (multiple member)

PO BOX 3006

SALEM, OR 97302-0006 LSREF GOLDEN OPS 14 (SC) LLC

Total Number of Licensed Beds 110

Resident Beds: 110 Resident Rooms 100
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

LAKES AT LITCHFIELD ASSISTED LIVING

120 LAKES AT LITCHFIELD DR PAWLEYS ISLAND, SC 29585

MCKINSTRY, NANCY W PH#: 843-235-9393

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1116 / 08/31/2009

Georgetown / Ltd. Liability
38 LAKES AT LITCHFIELD DR

PAWLEYS ISLAND, SC 29585-0000

LITCHFIELD RETIREMENT L L C

Total Number of Licensed Beds 79

Resident Beds: 79 Resident Rooms 65
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

LAKEVIEW ASSISTED LIVING

320 CAMP RD

WALHALLA, SC 29691-4811

HARDY, MAURICA L PH#: 864-638-5212

Fac. Cont. Email: LAKEVIEWAL1@JUNO.COM

Certified For Alzheimers Care

CRC-0086 / 04/30/2009

Oconee / Non-Profit Corporation

320 CAMP RD

WALHALLA, SC 29691

LAKEVIEW ASSISTED LIVING INC

Total Number of Licensed Beds 19

Resident Beds: 19 Resident Rooms 14
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0690 / 09/30/2009

Charleston / State

PO BOX 22708

LAMBS ROAD COMMUNITY RESIDENCE

4788 LAMBS RD

Certified For

NORTH CHARLESTON, SC 29418

JOHNSTON, GLORIA J PH#: 843-767-1066

Fac. Cont. Email: DGOLDMINTZ@DSNCC.COM

Total Number of Licensed Beds 8

CHARLESTON, SC 29413

Posident Pode: 9

Resident Beds: 8 Resident Rooms 6
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

DISABILITIES BOARD OF CHARLESTON COUNTY

LANGIT'S ASSISTED LIVING FACILITY

1273 REMOUNT RD

NORTH CHARLESTON, SC 29406

LANGIT, CRESENCIA B PH#: 843-554-1671

Fac. Cont. Email: LANGITSASSISTEDLIVING@COMCAST.NET

CRC-0861 / 03/31/2010 Charleston / Corporation 1273 REMOUNT RD

NORTH CHARLESTON, SC 29406 LANGIT'S RESIDENTIAL HOME CARE INC

Certified For Total Number of Licensed Beds 70

Resident Beds: 70 Resident Rooms 35 Staff Beds: 6 Staff Rooms: 4 Other Beds: 0 Other Rooms: 0

LANGSTON HOUSE

939 SPRINGDALE DR CLINTON, SC 29325

TURNER, MAPHRY B PH#: 803-684-0183

Fac. Cont. Email: No Fac. Cont. Email on record

rac. Cont. Email. No Fac. Cont. Email on record

CRC-1408 / 11/30/2009 Laurens / Corporation 939 SPRINGDALE DR CLINTON, SC 29325

ASSISTED LIVING CONCEPTS INC

Certified For Total Number of Licensed Beds 44

Resident Beds: 44 Resident Rooms 39
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

LAUREL CREST

100 JOSEPH WALKER DR

WEST COLUMBIA, SC 29169-6939 BRYAN, MARY Y PH#: 803-796-0370

Fac. Cont. Email: M.BRYAN@LAUREL-CREST.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-0829 / 09/30/2009

Lexington / Non-Profit Corporation 100 JOSEPH WALKER DR WEST COLUMBIA, SC 29169

FPCRC INC

Total Number of Licensed Beds 26

Resident Beds: 26 Resident Rooms 22
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

LAUREL GARDENS SENIOR LIVING COMMUNITY

1938 MOUNTAIN LAUREL CT FLORENCE, SC 29505

ATKINSON, KATHRYN J PH#: 843-665-7978

Fac. Cont. Email: ADMIN@LAURELGARDENSALF.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1387 / 04/30/2010

Florence / Ltd. Liability

PO BOX 3006 **SALEM, OR 97302**

FLORENCE SENIOR LIVING LLC

Total Number of Licensed Beds 90

Resident Beds: 90 Resident Rooms 65 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0

0

Other Rooms:

LAURENS MEMORIAL HOME FOR AGED INC

3744 TORRINGTON RD LAURENS, SC 29360-0638

PENLAND, CAROLYN B PH#: 864-682-2322

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-0316 / 12/31/2009

Laurens / Non-Profit Corporation

PO BOX 638

LAURENS, SC 29360

LAURENS MEMORIAL HOME FOR AGED INC

Total Number of Licensed Beds 50

Resident Beds: 50 **Resident Rooms** 0 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

LEMONAIDE HOUSE

1018 CRYSTAL CLEAR LN HOPKINS, SC 29061

ETHRIDGE, LULA J PH#: 803-776-1742

Fac. Cont. Email: LYMINAIDE@AOL.COM

CRC-0924 / 05/31/2009 Richland / Partnership

HOPKINS, SC 29061

1018 CRYSTAL CLEAR LN

LULA J ETHERIDGE AND NANCY A SMITH

Certified For Alzheimers Care Total Number of Licensed Beds 15

> Resident Beds: 15 **Resident Rooms** 7 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

LENEVAR COMMUNITY RESIDENCE

1435 W LENEVAR DR

CHARLESTON, SC 29407-0000

JOHNSTON, GLORIA J PH#: 843-766-3061

Fac. Cont. Email: DGOLDMINTZ@DSNCC.COM

Certified For

CRC-0943 / 07/31/2009 Charleston / State

PO BOX 22708

CHARLESTON, SC 29413-2708

DISABILITIES BOARD OF CHARLESTON COUNTY

Total Number of Licensed Beds

Resident Beds: 8 Resident Rooms 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

LEXINGTON GARDENS ASSISTED LIVING COMMUNITY

190 MCSWAIN DR

WEST COLUMBIA, SC 29169

CLEMENT, BARBARA A PH#: 803-741-8279

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1386 / 04/30/2010 Lexington / Ltd. Liability 190 MCSWAIN DR

WEST COLUMBIA, SC 29169 WEST COLUMBIA SENIOR LIVING LLC

Total Number of Licensed Beds 90

Resident Beds: 90 Resident Rooms 72 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

LLOYD AND SONS RESIDENTIAL CARE HOME

751 W EVANS ST

FLORENCE, SC 29501

SMITH, BERNICE S PH#: 843-661-6966

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0835 / 09/30/2009

Florence / Sole Proprietorship

PO BOX 15306 QUINBY, SC 29506 LLOYD L SMITH JR

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

LODGE AT ASCENSION

7142 WOODROW ST IRMO, SC 29063

OHRIN, NICOLE L PH#: 803-796-9296

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1477 / 06/30/2009 Lexington / Corporation

7142 WOODROW ST IRMO, SC 29063

LODGE AT ASCENSION INC

Total Number of Licensed Beds 64

Resident Beds: 64 Resident Rooms 32
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

LOIS EARGLE HOME

406 WEBB ST

CONWAY, SC 29527

PROULX, ALYSON C PH#: 843-347-3010

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1450 / 07/31/2009

Horry / County 406 WEBB ST

CONWAY, SC 29527

HORRY COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0592 / 05/31/2009

Saluda / Corporation

1280 DENNY HWY

SALUDA, SC 29138

LONG'S RESIDENTIAL CARE CENTER INC

1280 DENNY HWY SALUDA, SC 29138

LONG, MARY J PH#: 864-445-7901

Certified For Alzheimers Care

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0797 / 12/31/2009

1687 LONGWOOD DR

SOUTHERN CARE INC

Berkeley / Ltd. Liability

204 MENDENHALL ST

CRC-1474 / 04/30/2010

EHRHARDT, SC 29081

PO BOX 116

SUMMERVILLE, SC 29483

RAINBOW RESIDENTIAL HOME L L C

Orangeburg / Corporation

ORANGEBURG, SC 29118

Total Number of Licensed Beds 32

Resident Beds: 32 Resident Rooms 15 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

LONG'S RESIDENTIAL CARE CENTER INC

LONGWOOD PLANTATION

1687 LONGWOOD DR ORANGEBURG, SC 29118

HOOKER, JEAN C PH#: 803-535-0250 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care Total Number of Licensed Beds 42

> **Alzheimers Unit** Resident Beds: 42 **Resident Rooms** 30

> > Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

> > > CRC-1353 / 03/31/2009 (Renewal Pending)

LOW COUNTRY HOME

105 MCKNIGHT ST

MONCKS CORNER, SC 29461 BEY, LAILA R PH#: 843-899-6950

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Total Number of Licensed Beds 5

Resident Beds: 5 **Resident Rooms** 3 **Staff Rooms:** Staff Beds: 0 0

Other Beds: 0 Other Rooms: 0

LOWCOUNTRY ASSISTED LIVING

6060 EHRHARDT RD EHRHARDT, SC 29081

HIERS, BARBARA M PH#: 803-267-2222

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms**

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

LOW COUNTRY ASSISTED LIVING LLC

Bamberg / Limited Liability Company (multiple member)

5

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DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

M & M RESIDENTIAL CARE HOME

408 HOLIDAY ST MARION, SC 29571

BURGESS, SANDY M PH#: 843-423-0120 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1379 / 08/31/2009 Marion / Sole Proprietorship

PO BOX 6023

FLORENCE, SC 29502

BURGESS, SANDY

Total Number of Licensed Beds

Resident Beds: 5 **Resident Rooms** 3 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

MAGGIE MANOR

300 S FIFTH ST EASLEY, SC 29640

OWENS, ELLEN A PH#: 864-859-4370

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0295 / 11/30/2009 Pickens / Corporation 200 S FIFTH ST

EASLEY, SC 29640

WEST END RETIREMENT CENTER INC

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 6 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MAGNOLIAS OF ANDERSON

2203 MARCHBANKS AVE ANDERSON, SC 29621

FOARD, PAULA M PH#: 864-231-7786

Fac. Cont. Email: MBDUNMOYER@AOL.COM

Certified For

CRC-1327 / 06/30/2009 Anderson / Ltd. Liability 2203 MARCHBANKS AVE

ANDERSON, SC 29621 CAROLINA RETIREMENT SERVICES OF ANDERSON L L C

Total Number of Licensed Beds 60

Resident Beds: 60 **50 Resident Rooms Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

MAGNOLIAS OF ANDERSON

2203 MARCHBANKS AVE ANDERSON, SC 29621

FOARD, PAULA M PH#: 864-231-7786

Fac. Cont. Email: MBDUNMOYER@AOL.COM

Certified For

CRC-1413 / 05/31/2009 Anderson / Ltd. Liability 2203 MARCHBANKS AVE ANDERSON, SC 29621

CAROLINA RETIREMENT SERVICES OF ANDERSON L L C

Total Number of Licensed Beds 60

Resident Beds: 60 **Resident Rooms** 50 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

MAGNOLIAS OF EASLEY

123 COUCH LN EASLEY, SC 29642

PARKS, SUE A PH#: 864-859-3303

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1274 / 03/31/2010
Pickens / Ltd. Liability
123 COUCH LN
EASLEY, SC 29642
EASLEY RETIREMENT L L C

Total Number of Licensed Beds 56

Resident Beds: 56 Resident Rooms 50 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MAGNOLIAS OF GAFFNEY ASSISTED LIVING COMMUNITY

223 TIFFANY PARK GAFFNEY, SC 29341

WISE, BONITA D PH#: 864-206-0006

Fac. Cont. Email: BWISE@MAGNOLIASGAFFNEY.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1281 / 06/30/2009 Cherokee / Ltd. Liability 223 TIFFANY PARK GAFFNEY, SC 29341 GAFFNEY RETIREMENT L L C

Total Number of Licensed Beds 90

Resident Beds: 90 Resident Rooms 62
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MAGNOLIAS OF MYRTLE BEACH

6309 HAWTHORNE LN MYRTLE BEACH, SC 29572

GRAHAM, DENISE J PH#: 843-692-2330

Fac. Cont. Email: DODENICNAT@YAHOO.COM

Certified For

CRC-1415 / 05/31/2009 Horry / Ltd. Liability 6309 HAWTHORNE LN MYRTLE BEACH, SC 29572

CAROLINA RETIREMENT SERVICES OF MYRTLE BEACH LLC

Total Number of Licensed Beds 48

Resident Beds: 48 Resident Rooms 37
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MAGNOLIAS OF SANTEE

118 BRITAIN ST SANTEE, SC 29142

WILLIS, TAMMY S PH#: 803-854-2020

Fac. Cont. Email: MAGNOLIAS.OFSANTEE@NTINET.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1416 / 05/31/2009 Orangeburg / Ltd. Liability

118 BRITAIN ST SANTEE, SC 29142

CAROLINA RETIREMENT SERVICES OF SANTEE L L C

Total Number of Licensed Beds 44

Resident Beds: 44 Resident Rooms 31 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

MAGNOLIAS OF SUMMERVILLE

335 MIDLAND PKWY

SUMMERVILLE, SC 29485-8138

MEDEIROS, ANNETTE R PH#: 843-821-4122

Fac. Cont. Email: TBRAZEN@BELLSOUTH.NET

Certified For

CRC-1414 / 05/31/2009 Dorchester / Ltd. Liability 335 MIDLAND PKWY

SUMMERVILLE, SC 29485-8138

CAROLINA RETIREMENT SERVICES OF SUMMERVILLE L L C

Total Number of Licensed Beds 60

Resident Rooms Resident Beds: 60 50 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

MAMIE'S ADULT GROUP HOMES INC

102 CONEY CT

SUMMERVILLE, SC 29483

REEVES, KARIN D PH#: 843-832-3887 Fac. Cont. Email: PT1785@AOL.COM

Certified For Alzheimers Care

CRC-1247 / 05/31/2009

Berkeley / Corporation

PO BOX 1664

SUMMERVILLE, SC 29484 MAMIE'S ADULT GROUP HOMES INC

Total Number of Licensed Beds 5

Resident Beds: 5 **Resident Rooms** 2 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MAMIE'S ADULT GROUP HOMES INC #2

207 GENERAL DENNIS DR SUMMERVILLE, SC 29483

REEVES, KARIN D PH#: 843-832-3887

Fac. Cont. Email: PT1785@AOL.COM

Certified For Alzheimers Care

CRC-1294 / 02/28/2010 Berkeley / Corporation

PO BOX 1664

SUMMERVILLE, SC 29484

MAMIE'S ADULT GROUP HOMES INC

Total Number of Licensed Beds

Resident Beds: 5 **Resident Rooms** 3 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

MANNING HOUSE

10 COMPANION CT GREER, SC 29651-0000

RIGSBEE, SYLVIA A PH#: 864-989-0707

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1407 / 10/31/2009

Greenville / Corporation 10 COMPANION CT

GREER, SC 29651

ASSISTED LIVING CONCEPTS INC

Total Number of Licensed Beds 44

Resident Beds: 44 **Resident Rooms** 39 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0819 / 05/31/2009

Anderson / Corporation

224 WILDWOOD DR

MAPLES OF HONEA PATH 224 WILDWOOD DR HONEA PATH, SC 29654

WILLIS, MARK N PH#: 864-369-2000

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Total Number of Licensed Beds 74

HONEA PATH, SC 29654 MAPLE MANOR INC

Resident Beds: 74 Resident Rooms 50 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

MARANATHA MANOR OF SPARTANBURG

2902 E MAIN ST

SPARTANBURG, SC 29307-0000

MAHAFFEY, MARY K PH#: 864-579-0086

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1235 / 12/31/2009

Spartanburg / Corporation

2902 E MAIN ST

SPARTANBURG, SC 29307-1252

MARANATHA MANOR OF SPARTANBURG INC

Total Number of Licensed Beds 81

Resident Beds: 81 **Resident Rooms** 48 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

MARETT BOULEVARD COMMUNITY RESIDENTIAL CARE FACILITY

1721 MARETT BLVD EXT

ROCK HILL, SC 29732

ARD, TERRENCE E PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0883 / 08/31/2009

York / Non-Profit Corporation

PO BOX 30

ROCK HILL, SC 29731

YORK COUNTY SPECIAL HOUSING INC

Certified For Total Number of Licensed Beds

> **Resident Beds:** 8 **Resident Rooms** 8 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

MARIA'S PRIORITY CARE RESIDENTIAL HOME I

3117 MEETING ST RD

NORTH CHARLESTON, SC 29405

PARANAL, ROGERIA R PH#: 843-554-0064

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0937 / 07/31/2009 Charleston / Partnership

3117 MEETING ST RD

NORTH CHARLESTON, SC 29405

ROGELIO ROBIANES PARANAL AND ROGERIA RELLORA PARANAL

Total Number of Licensed Beds

Resident Beds: 7 **Resident Rooms** 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

MARIA'S PRIORITY CARE RESIDENTIAL HOME II-B

4583-B DURANT AVE

NORTH CHARLESTON, SC 29405

RELLORA, WILHELMINA C PH#: 843-566-9864

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0772 / 06/30/2009 Charleston / Partnership

PO BOX 70037

CHARLESTON, SC 29415

JESUS N AND WILHELMINA C RELLORA

Total Number of Licensed Beds 7

Resident Beds: 7 **Resident Rooms** 2 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

MARIA'S PRIORITY CARE RESIDENTIAL HOME II-E

4583-E DURANT AVE

NORTH CHARLESTON, SC 29405

RELLORA, WILHEMINA C PH#: 843-566-0460

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0773 / 06/30/2009

Charleston / Partnership

PO BOX 70037

CHARLESTON, SC 29415

JESUS N AND WILHELMINA C RELLORA

Total Number of Licensed Beds 6

Resident Beds: 6 **Resident Rooms** 4 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

MARIA'S PRIORITY CARE RESIDENTIAL HOME II-F

4583-F DURANT AVE

NORTH CHARLESTON, SC 29405

RELLORA, WILHELMINA C PH#: 843-556-1524

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0774 / 06/30/2009

Charleston / Partnership

PO BOX 70037

CHARLESTON, SC 29415

JESUS N AND WILHELMINA C RELLORA

Certified For Total Number of Licensed Beds

> **Resident Beds:** 5 **Resident Rooms** 3 **Staff Rooms:** Staff Beds: 1 1 Other Beds: 0 Other Rooms: 0

MARIA'S PRIORITY CARE RESIDENTIAL HOME III

3115 MEETING ST RD

NORTH CHARLESTON, SC 29405

PARANAL, ROGERIA R PH#: 843-554-0064

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0938 / 07/31/2009

Charleston / Partnership 3115 MEETING ST RD

NORTH CHARLESTON, SC 29405

ROGELIO ROBIANES PARANAL AND ROGERIA RELLORA PARANAL

Total Number of Licensed Beds

Resident Beds: 7 **Resident Rooms** 3 Staff Beds: Staff Rooms: 1 1 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0022 / 01/31/2010

Charleston / Partnership

207 W POPLAR ST

MARJORIE'S COMMUNITY CARE HOME

207 W POPLAR ST

Certified For

CHARLESTON, SC 29403-3320

WOFFORD, EMILY N PH#: 843-722-4792

Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds

CHARLESTON, SC 29403

Resident Beds: 8 **Resident Rooms** 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MARJORIE G OREE AND EMILY N WOFFORD

MARQUISE RESIDENTIAL HOME

9 FRAZIER VILLAGE DR BEAUFORT, SC 29906

HAYWARD, MATTIE L PH#: 843-846-8417 Fac. Cont. Email: No Fac. Cont. Email on record 9 FRAZIER VILLAGE DR BEAUFORT, SC 29906 MATTIE L HAYWARD

CRC-0863 / 03/31/2010

Beaufort / Sole Proprietorship

Certified For Total Number of Licensed Beds 5

> **Resident Beds:** 5 **Resident Rooms** 3 2 Staff Beds: Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

MARTHA FRANKS BAPTIST RETIREMENT COMMUNITY (CRCF)

1 MARTHA FRANKS DR LAURENS, SC 29360-1772 HAIR, DINA M PH#: 864-984-4541

Fac. Cont. Email: DHAIR@SCBMA.COM

CRC-0360 / 02/28/2010

Laurens / Non-Profit Corporation

1 MARTHA FRANKS DR LAURENS, SC 29360

CRC-1446 / 06/30/2009

GEORGETOWN, SC 29442

Georgetown / County

PO BOX 1471

NEEDS

SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC

GEORGETOWN COUNTY BOARD OF DISABILITIES AND SPECIAL

Total Number of Licensed Beds 82 **Certified For**

> Resident Beds: 82 **Resident Rooms** 82 Staff Beds: 0 0 **Staff Rooms:** Other Beds: 0 Other Rooms: 0

MARYVILLE COMMUNITY RESIDENCE

2602 OLD CHARLESTON RD GEORGETOWN, SC 29440-1471 BAKER, DAVID B PH#: 843-546-8228

Fac. Cont. Email: EKRAUSS@GCBDSN.COM

Resident Beds: 8 Resident Rooms 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

Certified For Total Number of Licensed Beds

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-0358 / 02/28/2010

5870 MOOREFIELD HWY LIBERTY, SC 29657

Pickens / Corporation

MASTER CARE INC

MASTER CARE INC

5870 MOOREFIELD HWY LIBERTY, SC 29657

MASTERS, JIMMY D PH#: 864-878-9926 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Total Number of Licensed Beds 14

Resident Beds: 14 **Resident Rooms** 9 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

MCELVEEN MANOR INC

2065 MCCRAY'S MILL RD SUMTER, SC 29154-9645

MCELVEEN, MICHELE S PH#: 803-778-9690 Fac. Cont. Email: MCELVEENMANOR@SC.RR.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-0988 / 03/31/2010 Sumter / Corporation 2065 MCCRAY'S MILL RD

SUMTER, SC 29154-9645 MCELVEEN MANOR INC

Total Number of Licensed Beds 100

Resident Beds: 100 **Resident Rooms** 64 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MCKINNEY HOUSE

307 MILLER RD MAULDIN, SC 29662

MAY, HOLLY J PH#: 864-297-5044

Fac. Cont. Email: HJM34@SCDMH.ORG

CRC-0778 / 07/31/2009

Greenville / State 307 MILLER RD

MAULDIN, SC 29662

PIEDMONT CENTER FOR MENTAL HEALTH SERVICES

Certified For

Total Number of Licensed Beds 10

Resident Beds: 10 10 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

MCLEOD MANOR INC

1707 MCLEOD AVE CHARLESTON, SC 29412

ALSTON, MARTHA S PH#: 843-795-8780 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0425 / 03/31/2009 (Renewal Pending)

Charleston / Corporation 1707 MCLEOD AVE CHARLESTON, SC 29412

MCLEOD MANOR INC

Total Number of Licensed Beds 16

Resident Beds: 16 **Resident Rooms** 7 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0971 / 01/31/2010

5748 KNIGHTNER ST

COLUMBIA, SC 29203

KAREN MCMILLIAN

Richland / Sole Proprietorship

MCMILLIANS COMMUNITY CARE HOME

5748 KNIGHTNER ST COLUMBIA, SC 29203

Certified For

MCMILLIAN, KAREN B PH#: 803-754-7089

Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds 11

Resident Beds: 11 **Resident Rooms** 6 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

MEADOWLARK DRIVE COMMUNITY RESIDENTIAL CARE FACILITY

1183 MEADOWLARK DR ROCK HILL, SC 29732 ARD, TERRENCE E PH#:

Certified For

Fac. Cont. Email: No Fac. Cont. Email on record

YORK COUNTY SPECIAL HOUSING INC

CRC-0881 / 08/31/2009

ROCK HILL, SC 29731

PO BOX 30

York / Non-Profit Corporation

Total Number of Licensed Beds 8

Resident Beds: 8 **Resident Rooms** 8 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

METHODIST OAKS RESIDENTIAL CARE FACILITY

1000 METHODIST OAKS DR ORANGEBURG, SC 29115

JOHNSON, PATRICIA W PH#: 803-534-1212 Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0910 / 05/31/2009

Orangeburg / Non-Profit Corporation

PO BOX 327

ORANGEBURG, SC 29116-0327 METHODIST OAKS THE INC

Certified For Total Number of Licensed Beds 40

> Resident Beds: 40 **Resident Rooms** 38 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

MIDLAND PARK RESIDENTIAL HOME CARE

2712 MIDLAND PARK RD

NORTH CHARLESTON, SC 29406

SINGIAN, ROGELIO C PH#: 843-569-0025 Fac. Cont. Email: RVBALAGTASSC@AOL.COM

Certified For

CRC-0905 / 01/31/2010 Charleston / Corporation 2712 MIDLAND PARK RD

NORTH CHARLESTON, SC 29406 MIDLAND PARK RESIDENTIAL HOME CARE

Total Number of Licensed Beds 52

Resident Beds: 52 Resident Rooms 27 Staff Beds: 3 Staff Rooms: 2 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

MIDWAY RESIDENTIAL CARE FACILITY #1

4026 MOORE DUNCAN HWY

MOORE, SC 29369

PEARSON, PATRICIA S PH#: 864-433-8999

Fac. Cont. Email: LCWALKER428@YAHOO.COM

Certified For

CRC-0318 / 12/31/2009 Spartanburg / Corporation 4026 MOORE DUNCAN HWY

MOORE, SC 29369

MIDWAY RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds 13

Resident Beds: 13 **Resident Rooms** 7 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

MIDWAY RESIDENTIAL CARE FACILITY #1A

4026 MOORE DUNCAN HWY

MOORE, SC 29369

PEARSON, PATRICIA S PH#: 864-433-8999

Fac. Cont. Email: LCWALKER428@YAHOO.COM

Certified For

CRC-0320 / 12/31/2009 Spartanburg / Corporation 4026 MOORE DUNCAN HWY

MOORE, SC 29369

MIDWAY RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds 14

Resident Beds: 14 7 **Resident Rooms** Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

MIDWAY RESIDENTIAL CARE FACILITY #2

4026 MOORE DUNCAN HWY

MOORE, SC 29369

PEARSON, PATRICIA S PH#: 864-433-8999

Fac. Cont. Email: LCWALKER428@YAHOO.COM

CRC-0321 / 12/31/2009

Spartanburg / Corporation

4026 MOORE DUNCAN HWY

MOORE, SC 29369

MIDWAY RESIDENTIAL CARE FACILITY INC

Certified For Total Number of Licensed Beds 25

> Resident Beds: 25 11 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

MIDWAY RESIDENTIAL CARE FACILITY #3

4026 MOORE DUNCAN HWY

MOORE, SC 29369

PEARSON, PATRICIA S PH#: 864-433-8999

Fac. Cont. Email: LCWALKER428@YAHOO.COM

Certified For

CRC-0346 / 12/31/2009 Spartanburg / Corporation 4026 MOORE DUNCAN HWY

MOORE, SC 29369

MIDWAY RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds 17

Resident Beds: 17 **Resident Rooms** 8 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

MIDWAY RESIDENTIAL CARE FACILITY #4

4026 MOORE DUNCAN HWY

MOORE, SC 29369

PEARSON, PATRICIA S PH#: 864-433-8999

Fac. Cont. Email: LCWALKER428@YAHOO.COM

Certified For

CRC-0322 / 12/31/2009 Spartanburg / Corporation 4026 MOORE DUNCAN HWY

MOORE, SC 29369

MIDWAY RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds 14

Resident Beds: 14 Resident Rooms 7
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MIDWAY RESIDENTIAL CARE FACILITY #5

4026 MOORE DUNCAN HWY

MOORE, SC 29369

PEARSON, PATRICIA S PH#: 864-433-8999

Fac. Cont. Email: LCWALKER428@YAHOO.COM

Certified For

CRC-0616 / 12/31/2009 Spartanburg / Corporation 4026 MOORE DUNCAN HWY

MOORE, SC 29369

MIDWAY RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds 12

Resident Beds: 12 Resident Rooms 6
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MILES RESIDENTIAL CARE

490 KOON STORE RD COLUMBIA, SC 29203

MILES, BETTY A PH#: 803-754-4039

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0695 / 12/31/2009 Richland / Partnership 4230 HIGHLAND PARK DR COLUMBIA, SC 29204 BETTY A AND LOUIS B MILES

Total Number of Licensed Beds 7

Resident Beds: 7 Resident Rooms 4
Staff Beds: 2 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

MILL STREET COMMUNITY RESIDENCE

415 MILL ST

LAURENS, SC 29360-0986

GODFREY, ANDRIKA PH#: 864-682-2314

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1419 / 12/31/2009

Laurens / Non-Profit Corporation

PO BOX 986

LAURENS, SC 29360

LAURENS COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms 8
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

MILLER'S PLACE

140 COX ST

SPARTANBURG, SC 29306

MILLER, ANNIE M PH#: 864-573-7008

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0897 / 10/31/2009

Spartanburg / Sole Proprietorship

140 COX ST

SPARTANBURG, SC 29306 ANNIE MILDRED MILLER

Total Number of Licensed Beds 19

Resident Beds: 19 **Resident Rooms** 9 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

MIRCI GROUP HOME I

581 BECKMAN DR

COLUMBIA, SC 29203-3207

GARY, SHARON L PH#: 803-754-4221

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1443 / 06/30/2009

Richland / Corporation

PO BOX 4246

COLUMBIA, SC 29240

MENTAL ILLNESS RECOVERY CENTER INC

Total Number of Licensed Beds 6

Resident Beds: 6 **Resident Rooms** 0 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MIRCI GROUP HOME II

611 BECKMAN RD COLUMBIA, SC 29223

GARY, SHARON L PH#: 803-754-4221

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1444 / 06/30/2009 Richland / Corporation

PO BOX 4246

COLUMBIA, SC 29240

MENTAL ILLNESS RECOVERY CENTER INC

Certified For Total Number of Licensed Beds

> **Resident Beds:** 6 **Resident Rooms** n **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

MONTROSE MANOR

80 MEDICAL CENTER DR WOODRUFF, SC 29388

GILSTRAP-HANKS, CAROLYN F PH#: 864-476-9100

Fac. Cont. Email: DKPENN@DOVEHLC.COM

CRC-1417 / 12/31/2009

Spartanburg / Ltd. Liability 80 MEDICAL CENTER DR

WOODRUFF, SC 29388

MONTROSE MANOR OPERATING COMPANY LLC

Certified For Alzheimers Care Total Number of Licensed Beds 60

> Resident Beds: 60 **Resident Rooms** 35 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

MORNINGSIDE OF ANDERSON

1304 MCLEES RD ANDERSON, SC 29621

SPEER, RICHARD W PH#: 864-964-9088

Fac. Cont. Email: RSPEER@5SQC.COM

Certified For

CRC-1093 / 04/30/2010

Anderson / Limited Liability Limited Partnership

1304 MCLEES RD ANDERSON, SC 29621

MORNINGSIDE OF ANDERSON L P

Total Number of Licensed Beds 88

CRC-1267 / 06/30/2009

Beaufort / Ltd. Liability

109 OLD SALEM RD

BEAUFORT, SC 29902

MORNINGSIDE OF BEAUFORT L L C

Resident Beds: 88 Resident Rooms 45
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF BEAUFORT

109 OLD SALEM RD BEAUFORT, SC 29902

SIEGNER, TAMATHE J PH#: 843-982-0220

Fac. Cont. Email: TSIEGNER@5SQC.COM

Total Number of Licensed Beds 49

Resident Beds: 49 Resident Rooms 40 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

Certified For

MORNINGSIDE OF CAMDEN

715 KERSHAW HWY CAMDEN, SC 29020-1634

BROWN, GARY H PH#: 803-713-8668

Fac. Cont. Email: GHBROWN@5SQC.COM

Certified For

CRC-1259 / 01/31/2010
Kershaw / Ltd. Liability
715 KERSHAW HWY
CAMDEN, SC 29020-1634
MORNINGSIDE OF CAMDEN L L C

Total Number of Licensed Beds 49

Resident Beds: 49 Resident Rooms 40
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF GEORGETOWN

2628 N FRASER ST

GEORGETOWN, SC 29440

WEAVER, ANITA N PH#: 843-520-0319

Fac. Cont. Email: AWEAVER@5SQC.COM

Certified For Alzheimers Care

CRC-1102 / 05/31/2009

Georgetown / Limited Liability Limited Partnership

2628 N FRASER ST

GEORGETOWN, SC 29440

MORNINGSIDE OF SOUTH CAROLINA L P

Total Number of Licensed Beds 59

Resident Beds: 59 Resident Rooms 49
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

MORNINGSIDE OF GREENWOOD

116 ENTERPRISE CT GREENWOOD, SC 29649

AMERSON, KATHERINE D PH#: 864-388-9433

Fac. Cont. Email: KAMERSON@5SQC.COM

Certified For

CRC-1088 / 04/30/2010

Greenwood / Limited Liability Limited Partnership

116 ENTERPRISE CT GREENWOOD, SC 29649

MORNINGSIDE OF GREENWOOD L P

Total Number of Licensed Beds 49

Resident Beds: 49 Resident Rooms 44 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF HARTSVILLE

1901 W CAROLINA AVE HARTSVILLE, SC 29550

PENNINGTON, ANN M PH#: 843-857-0159

Fac. Cont. Email: APENNINGTON@5SQC.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1099 / 06/30/2009 Darlington / Ltd. Liability 1901 W CAROLINA AVE

HARTSVILLE, SC 29550

MORNINGSIDE OF HARTSVILLE LLC

Total Number of Licensed Beds 54

Resident Beds: 54 **Resident Rooms** 54 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF LANCASTER

1004 HARDIN ST

LANCASTER, SC 29720

BROOKS, NANCY M PH#: 803-285-8152

Fac. Cont. Email: NBROOKS@FSQC.COM

Certified For Alzheimers Care

CRC-1146 / 03/31/2010

Lancaster / Limited Liability Limited Partnership

1004 HARDIN ST

LANCASTER, SC 29720

MORNINGSIDE OF SOUTH CAROLINA L P

Total Number of Licensed Beds 65

Alzheimers Unit

Resident Beds: 65 49 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF LEXINGTON

218 OLD CHAPIN RD

LEXINGTON, SC 29072

ELLROTT, FAYE E PH#: 803-957-3600

Fac. Cont. Email: DSHEALY@5SQC.COM

Certified For

CRC-1280 / 06/30/2009

Lexington / Ltd. Liability 218 OLD CHAPIN RD

LEXINGTON, SC 29072

MORNINGSIDE OF LEXINGTON L L C

Total Number of Licensed Beds 49

Resident Beds: 49 **Resident Rooms** 42 0 Staff Rooms: 0 Staff Beds: Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1261 / 02/28/2010

2306 RIVERBANK DR

Orangeburg / Ltd. Liability

MORNINGSIDE OF ORANGEBURG

2306 RIVERBANK DR ORANGEBURG, SC 29118

JOHNSON, JERRI S PH#: 803-539-2911 Fac. Cont. Email: JSJOHNSON@5SQC.COM

Certified For Alzheimers Care

ORANGEBURG, SC 29118-4046 MORNINGSIDE OF ORANGEBURG L L C

Total Number of Licensed Beds 49

Resident Beds: 49 Resident Rooms 49 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF ROCK HILL

1830 W MAIN ST ROCK HILL, SC 29732

HALL, LESLIE W PH#: 803-980-4100

Fac. Cont. Email: LHALL@5SQC.COM

Certified For

CRC-1114 / 08/31/2009

York / Limited Liability Limited Partnership

1830 W MAIN ST ROCK HILL, SC 29732

MORNINGSIDE OF SOUTH CAROLINA L P

Total Number of Licensed Beds 60

Resident Beds: 60 **Resident Rooms** 49 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

MORNINGSIDE OF SENECA

15855 WELLS HWY SENECA, SC 29678

SWENEY, CYNTHIA J PH#: 864-888-8886

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1157 / 05/31/2009

Oconee / Limited Liability Limited Partnership

15855 WELLS HWY SENECA, SC 29678

MORNINGSIDE OF SENECA L P

Total Number of Licensed Beds 59

Resident Beds: 59 49 **Resident Rooms Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF SUMTER

2500 LIN-DO CT

SUMTER, SC 29150-0000

WATFORD, TONYA D PH#: 803-469-4490

Fac. Cont. Email: TWATFORD@5SQC.COM

Certified For

CRC-1079 / 04/30/2009

Sumter / Limited Liability Limited Partnership

2500 LIN-DO CT SUMTER, SC 29150

MORNINGSIDE OF SOUTH CAROLINA L P

Total Number of Licensed Beds 55

Resident Beds: 55 Resident Rooms 49 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

MURRY'S COMMUNITY CARE HOME INC

5318 N MAIN ST

COLUMBIA, SC 29203

ANDERSON, VALENCIA W PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0208 / 08/31/2007 (Renewal Pending)

Richland / Corporation

PO BOX 23832

COLUMBIA, SC 29224-2383

MURRY'S COMMUNITY CARE HOME INC

Total Number of Licensed Beds

Resident Beds: 6 **Resident Rooms** 3 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

MY FATHER'S HOUSE

22 LARNE ST

CHARLESTON, SC 29403

STENT, JOSEPHINE I PH#: 843-723-7889

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0459 / 02/28/2010

Charleston / Partnership

PO BOX 1647

CHARLESTON, SC 29402

JOSEPHINE STENT AND ELOISE CHESTNUT

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 4 Staff Beds: 1 Staff Rooms: 1 Other Rooms: Other Beds: 0 0

MY HOUSE COMMUNITY HOME

273 MARTIN RD

CADES, SC 29518

GLASSCHO, GERMAN PH#: 843-382-3277

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1318 / 07/31/2009

Williamsburg / Sole Proprietorship

PO BOX 358

GREELEYVILLE, SC 29056

GERMAN GLASSCHO

Certified For Total Number of Licensed Beds

> **Resident Beds:** 4 2 **Resident Rooms** Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

MYERS RESIDENTIAL CARE FACILITY

365 CALDON RD

SWANSEA, SC 29160-9541

MYERS, LOUISE PH#: 803-568-3582

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0644 / 08/31/2009

Calhoun / Partnership 365 CALDON RD

SWANSEA, SC 29160

LOUISE AND DAVID MYERS JR

Total Number of Licensed Beds

Resident Beds: 5 **Resident Rooms** 3 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-0851 / 01/31/2010

Calhoun / Partnership

MYERS RESIDENTIAL CARE FACILITY II

365 CALDON RD

SWANSEA, SC 29160-9541

MYERS, LOUISE PH#: 803-568-3582

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

365 CALDON RD SWANSEA, SC 29160

LOUISE AND DAVID MYERS JR

Total Number of Licensed Beds

Resident Rooms Resident Beds: 7 6 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

MYRTLE BEACH ESTATES

3620 HAPPY WOODS CT MYRTLE BEACH, SC 29588

JACKSON, THOMAS L PH#: 843-293-8888

Fac. Cont. Email: MBESTATE@SCCOAST.NET

Certified For Alzheimers Care

Alzheimers Unit

CRC-1403 / 11/30/2009

Horry / Corporation

3620 HAPPY WOODS CT MYRTLE BEACH, SC 29588

CSL LEASECO INC

Total Number of Licensed Beds 142

Resident Beds: 142 **Resident Rooms** 80 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MYRTLE BEACH MANOR RETIREMENT COMMUNITY

9547 HWY 17 N

MYRTLE BEACH 29572

BEARD, MICHAEL W PH#: 843-449-5283 Fac. Cont. Email: MBEARD@5SQC.COM

Certified For

CRC-1253 / 01/31/2010

Horry / Corporation 9547 HWY 17 N

MYRTLE BEACH, SC 29572

FS TENANT POOL I TRUST

Total Number of Licensed Beds 81

Resident Beds: 81 71 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

NEW HOPE RESIDENTIAL CARE

704 ANDERSON ST

CALHOUN FALLS, SC 29628-1034

SMITH III, THOMAS F PH#: 864-447-9277

Fac. Cont. Email: TOMSANDRA@BELLSOUTH.NET

Certified For

Abbeville / Ltd. Liability 704 ANDERSON ST

CALHOUN FALLS, SC 29628

S & S HEALTHCARE LLC

CRC-1389 / 04/30/2009

Total Number of Licensed Beds 18

Resident Beds: 18 **Resident Rooms** 9 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-1263 / 07/31/2009

NHC PLACE-CHARLESTON 1900 ASHLEY CROSSING DR CHARLESTON, SC 29414

ATKINSON, ANGELA G PH#: 843-852-0505

Fac. Cont. Email: ADMIN@TMCHARLESTONALF.COM

Certified For Alzheimers Care

Charleston / Limited Liability 1900 ASHLEY CROSSING DR CHARLESTON, SC 29414 NHC PLACE-CHARLESTON LLC

Total Number of Licensed Beds 60

Resident Beds: 60 Resident Rooms 60 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

NICHOLS RESIDENTIAL CARE FACILITY

702 RAILROAD AVE

LINCOLNVILLE, SC 29485

NICHOLS, LAVERNE PH#: 843-821-9608

Fac. Cont. Email: NICHOLSRESIDENTIAL@AOL.COM

Certified For

CRC-0973 / 12/31/2009 Charleston / Partnership 702 RAILROAD AVE LINCOLNVILLE, SC 29485

ALONZO NICHOLS AND LAVERNE NICHOLS

Total Number of Licensed Beds 5

Resident Beds: 5 **Resident Rooms** 3 Staff Beds: 1 Staff Rooms: 1 Other Rooms: Other Beds: 0 0

NORTH HAVEN RESIDENTIAL CARE HOME

4326 LESLIE ST

NORTH CHARLESTON, SC 29418

LANGIT, LEONORA D PH#: 843-767-2541

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0877 / 08/31/2009 Charleston / Corporation

4326 LESLIE ST

NORTH CHARLESTON, SC 29418

NORTH HAVEN RESIDENTIAL CARE HOME INC

Certified For Alzheimers Care Total Number of Licensed Beds 16

> Resident Beds: 16 **Resident Rooms** 8 Staff Beds: Staff Rooms: 1 2 Other Beds: 0 Other Rooms: 0

NORTH POINTE ASSISTED LIVING

701 SIMPSON RD

ANDERSON, SC 29621

MOORE, PEGGY D PH#: 864-231-0059

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1454 / 08/31/2009

Anderson / Ltd. Liability

701 SIMPSON RD ANDERSON, SC 29621

PE COUNTRY HERITAGE LLC

Total Number of Licensed Beds 70

Resident Beds: 70 **Resident Rooms** 41 0 Staff Rooms: 0 Staff Beds: Other Rooms: 0

Other Beds: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

NORTHWOODS RESIDENTIAL CARE FACILITY

2316 DUNLAP ST

CHARLESTON, SC 29406

SMITH, ALPHA R PH#: 843-572-8765

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1066 / 06/30/2009 Charleston / Corporation

PO BOX 60992

NORTH CHARLESTON, SC 29419-0992

NORTHWOODS RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds 10

CRC-1374 / 07/31/2009

ROCK HILL, SC 29732

PARK POINTE VILLAGE INC

York / Corporation

Resident Beds: 10 Resident Rooms 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

OAKBRIDGE TERRACE AT PARK POINTE VILLAGE

3025 CHESBROUGH BLVD ROCK HILL, SC 29732

Fac. Cont. Email: No Fac. Cont. Email on record

LATTIMER, NEVA J PH#:

Total Number of Licensed Beds 20

3025 CHESBROUGH BLVD

Resident Beds: 20 Resident Rooms 20 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

Certified For Alzheimers Care

OAKLAND RESIDENTIAL CARE HOME

415 OAKLAND AVE

FLORENCE, SC 29506-6409

SMITH, BERNICE S PH#: 843-679-0676

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0842 / 10/31/2009

Florence / Sole Proprietorship

PO BOX 15306 QUINBY, SC 29506 LLOYD L SMITH JR

Certified For Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

OAKLEAF VILLAGE AT THORNBLADE

1560 THORNBLADE BLVD GREER, SC 29650

CURE, CANDY D PH#: 864-968-1277

Fac. Cont. Email: CCURE@ROYALOAKLEAF.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1330 / 10/31/2009

Greenville / Ltd. Liability 1560 THORNBLADE BLVD

GREER, SC 29650

RSC GREENVILLE L L C

Total Number of Licensed Beds 100

Resident Beds: 100 Resident Rooms 90
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-1329 / 10/31/2009

Lexington / Ltd. Liability

800 N LAKE DR

OAKLEAF VILLAGE OF LEXINGTON

800 N LAKE DR

LEXINGTON, SC 29072

ANDERSON, MELANIE W PH#: 803-808-3477 Fac. Cont. Email: MANDERSON@OAKLAFVILLAGE.COM

Total Number of Licensed Beds 100

LEXINGTON, SC 29072

RSC LEXINGTON L L C

Certified For Alzheimers Care

Alzheimers Unit

Resident Rooms Resident Beds: 100 90 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

OAKMONT OF UNION (RESIDENTIAL CARE)

709 RICE AVE EXT UNION, SC 29379

FREEMAN, PATRICIA A PH#: 864-427-0306

Fac. Cont. Email: 4031-ADMIN@HCR-MANORCARE.COM

UNION, SC 29379

CRC-0576 / 12/31/2009

Union / Limited Liability

OAKMONT OF UNION SC LLC

709 ROCE AVENUSE EXT

Certified For Alzheimers Care

Total Number of Licensed Beds 40

Resident Beds: 40 **Resident Rooms** 32 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

OAKRIDGE COMMUNITY CARE HOME #1

2470 OLD MILL RD

INMAN, SC 29349

LAUGHTER, REBECCA H PH#: 864-472-6979

Fac. Cont. Email: BECK1041@EARTHLINK.NET

CRC-0241 / 08/31/2009

Spartanburg / Corporation

PO BOX 326

INMAN, SC 29349

OAKRIDGE COMMUNITY CARE HOME INC

Certified For

Total Number of Licensed Beds 38

CRC-0429 / 04/30/2009

PO BOX 326

INMAN, SC 29349

Spartanburg / Corporation

Resident Beds: 38 13 **Resident Rooms** Staff Beds: Staff Rooms: 1 1 Other Beds: 0 Other Rooms: 0

OAKRIDGE COMMUNITY CARE HOME #2

35 S HOWARD ST INMAN, SC 29349

HENRY, ROBIN A PH#: 864-472-3062

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Total Number of Licensed Beds 10

> Resident Beds: 10 Resident Rooms 4 Staff Beds: 1 Staff Rooms: 1 Other Rooms: 0

OAKRIDGE COMMUNITY CARE HOME INC

Other Beds: 0

hlcrc.rdf

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

OAKVIEW BOARDING HOME

1818 S LIVE OAK DR

MONCKS CORNER, SC 29461

BIASCAN, ERLINDA M PH#: 843-761-3273
Fac. Cont. Email: BIASCANA@YAHOO.COM

Certified For

CRC-1153 / 04/30/2010 Berkeley / Corporation 1818 S LIVE OAK DR

MONCKS CORNER, SC 29461 OAKVIEW BOARDING HOME INC

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

OASIS RESIDENTIAL HOME

2317 PRINCE ST

GEORGETOWN, SC 29440

GRAHAM, MAZIE E PH#: 843-527-4848

Fac. Cont. Email: OASISINC2001@YAHOO.COM

Certified For Alzheimers Care

CRC-1219 / 08/31/2009

Georgetown / Corporation

2317 PRINCE ST

GEORGETOWN, SC 29440 OASIS RESIDENTIAL HOME INC

Total Number of Licensed Beds 22

Resident Beds: 22 Resident Rooms 11
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

OLD HOMEPLACE INC

711 SCOTCH CROSS RD - E GREENWOOD, SC 29646

HANSEN, SYLVIA J PH#: 864-227-0074

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1423 / 01/31/2010

Greenwood / Non-Profit Corporation

711 SCOTCH CROSS RD - E GREENWOOD, SC 29646

OLD HOMEPLACE INC

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 5
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

OLIVER'S CARE HOME

1200 LAWHORN RD

BLYTHEWOOD, SC 29016

OLIVER, BARBARA J PH#: 803-754-3585

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1480 / 08/31/2009

Richland / Limited Liability 1200 LAWHORN RD

BLYTHEWOOD, SC 29016 OLIVER CARE HOME LLC

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

OMOOOO COMMUNITY CARE HOME

135 OMOOOO LN

SUMMERVILLE, SC 29483

LEVINE-SASS, OPAH O PH#: 843-688-4439

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

135 OMOOOO LN SUMMERVILLE, SC 29483

CRC-0190 / 02/28/2010

Berkeley / Partnership

OLIVER & MINA LEVINE

Total Number of Licensed Beds 43

Resident Beds: 43 Resident Rooms 20 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

PADD-WREN HOME

2350 REGIONAL RD FLORENCE, SC 29502 BRAGDON, DANNYE O PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

ac. Cont. Linaii. No rac. Cont. Email on record

CRC-1451 / 07/31/2009

Florence / Non-Profit Corporation

2350 REGIONAL RD FLORENCE, SC 29502

PRESBYTERIAN AGENCY FOR THE DEVELOPMENTALLY DISABLED

30

0

0

INC

Certified For Total Number of Licensed Beds 6

Resident Beds: 6 Resident Rooms 6
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

PAGELAND CARE FACILITY

206 S GUM ST

PAGELAND, SC 29728

FUNDERBURK, FRANCES D PH#: 843-672-5930
Fac. Cont. Email: DFUNDERBURK@INFOAVE.NET

Certified For Alzheimers Care

Alzheimers Unit

CRC-0999 / 04/30/2010

Chesterfield / Corporation

PO BOX 697

LANCASTER, SC 29721 FUNDERBURK ASSOCIATES INC

Total Number of Licensed Beds 58

Resident Beds: 58 Resident Rooms
Staff Beds: 0 Staff Rooms:

Other Beds: 0 Other Rooms:

PALM MEADOWS COURT MEMORY CARE COMMUNITY

48 MAIN ST

HILTON HEAD ISLAND, SC 29926

BEST, LORENA K PH#: 843-342-7122

Fac. Cont. Email: BRETT.SALMON@SUNWESTMANAGEMENT.COM

CRC-1275 / 06/30/2009

Beaufort / Ltd. Liability

3723 FAIRVIEW INDUSTRIAL DR SE, STE 270

SALEM, OR 97302

SANDDOLLAR COURT MEMORY CARE L L C

Certified For Alzheimers Care Total Number of Licensed Beds 36

Resident Beds: 36 Resident Rooms 32 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

PALM MEADOWS VILLAGE ASSISTED LIVING COMMUNITY

80 MAIN ST

Certified For

HILTON HEAD ISLAND, SC 29926

DREW, MELLISSA S PH#: 843-689-9143

Fac. Cont. Email: BRETT.SALMON@SUNWESTMANAGEMENT.COM

I.COM

CRC-1276 / 06/30/2009

Beaufort / Ltd. Liability

3723 FAIRVIEW INDUSTRIAL DR SE, STE 270

SALEM, OR 97302

SANDDOLLAR VILLAGE ASSISTED LIVING L L C

Total Number of Licensed Beds 52

Resident Beds: 52 Resident Rooms 42
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

PALMETTO RESIDENTIAL CARE OF NORTH CHARLESTON

2834 SPRUILL AVE

NORTH CHARLESTON, SC 29405 LESESNE, CLARA P PH#: 843-744-1249

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1322 / 08/31/2009

Charleston / Corporation PO BOX 31774

1020001771

CHARLESTON, SC 29417

EVERGREEN RESIDENTIAL CARE INC

Certified For Total Number of Licensed Beds 12

Resident Beds: 12 Resident Rooms 6
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

PALMETTO RIDGE ASSISTED LIVING & MEMORY CARE LLC

840 MANOR RD

CHERAW, SC 29520-4035

COOKE-EVANS, TONI PH#: 843-537-4197

Certified For Alzheimers Care

Fac. Cont. Email: CHERAWMANORASSIS@BELLSOUTH.NET

Alzheimers Unit

CRC-1393 / 03/31/2010

Chesterfield / Limited Liability Company (single member)

PALMETTO RIDGE ASSISTED LIVING AND MEMORY CARE LLC

Total Number of Licensed Beds 106

Resident Beds: 106 Resident Rooms 57
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

PALMETTO VILLAGE OF CHESTER

570 CENTER ST

CHESTER, SC 29706

WATTS, GLORIA F PH#: 803-581-7319

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1399 / 06/30/2009 Chester / Ltd. Liability

PO BOX 700

CHESTER, SC 29706 BHM OF CHESTER LLC

Total Number of Licensed Beds 100

Resident Beds: 100 Resident Rooms 50
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

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DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

PARK PLACE ASSISTED LIVING & MEMORY CARE COMMUNITY

2720 COUNTRY CLUB RD

SPARTANBURG, SC 29302-4473 PITTS, CATRINA S PH#: 864-591-1116

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1351 / 02/28/2010

Spartanburg / Ltd. Liability

3723 FAIRVIEW INDUSTRIAL DR SE

SALEM, OR 97302

SPARTANBURG SENIOR LIVING L L C

Total Number of Licensed Beds 100

Resident Beds: 100 Resident Rooms 87 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

PARKER'S RESIDENTIAL CARE HOME

935 PINE VIEW DR

NEW ELLENTON, SC 29809

PARKER, DRUCILLA O PH#: 803-652-7290

Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds 9

CRC-1391 / 05/31/2009

Florence / Ltd. Liability

3117 W PALMETTO ST

FLORENCE, SC 29501

Total Number of Licensed Beds 68

CRC-0311 / 01/31/2010

935 PINE VIEW DR

DRUCILLA PARKER

Aiken / Sole Proprietorship

NEW ELLENTON, SC 29809

Resident Beds: 9 Resident Rooms 4
Staff Beds: 2 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

Certified For

PEE DEE GARDENS
3117 W PALMETTO ST
FLORENCE, SC 29505-0000
BERG, SHANNON J PH#: 843-667-6699

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

FLORENCE LANDING LLC

Resident Beds: 68 Resident Rooms 47
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

PELION ELDERCARE

850 MAPLE ST

PELION, SC 29123-0206

BROWN, THOMAS E PH#: 803-894-3646

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-0631 / 07/31/2009

Lexington / Corporation

PELION, SC 29123

TOMACO INC

PO BOX 206

Total Number of Licensed Beds 39

Resident Beds: 39 Resident Rooms 21 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

PENDLETON MANOR

414 SUMMIT DR

GREENVILLE, SC 29609

CARRION, MARY M PH#: 864-271-7562

Fac. Cont. Email: MCARRYON@AOL.COM

Certified For Alzheimers Care

Alzheimers Unit

Greenville / Ltd. Liability 414 SUMMIT DR

CRC-1455 / 08/31/2009

GREENVILLE, SC 29609

GREENVILLE RETIREMENT PROPERTIES LLC

Total Number of Licensed Beds 65

Resident Rooms Resident Beds: 65 49 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

PERRY ELDERCARE

182 ROBERTS ST NE PERRY, SC 29137

BROWN, MARY W PH#: 803-564-5092

Fac. Cont. Email: THEELDERCARES@AOL.COM

Certified For Alzheimers Care

CRC-1183 / 01/31/2010

Aiken / Corporation

PO BOX 1189

WAGENER, SC 29164

TOMACO INC

Total Number of Licensed Beds 14

Resident Beds: 14 **Resident Rooms** 8 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

PETTIS ANGELS RESIDENTIAL CARE

2614 MADDEN DR

NORTH CHARLESTON, SC 29405-5529

PETTIS, ETHEL S PH#: 843-308-9413

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0850 / 01/01/2010

Charleston / Sole Proprietorship

3879 WALNUT AVE

NORTH CHARLESTON, SC 29405

ETHEL S PETTIS

Certified For Total Number of Licensed Beds 5

> **Resident Beds:** 5 3 **Resident Rooms** Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

PHAIRE'S CARE

167 BENTHOMP RD

ORANGEBURG, SC 29115

PHAIRE, LONELL PH#: 803-535-3228

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1459 / 12/31/2009

Orangeburg / Sole Proprietorship

880 BLVD ST NE

ORANGEBURG, SC 29115

LONELL PHAIRE

Total Number of Licensed Beds

Resident Beds: 5 **Resident Rooms** 3 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

PIEDMONT PATHWAYS COMMUNITY RESIDENTIAL CARE FACILITY

5640 LOWER RICHLAND BLVD

HOPKINS, SC 29061

Certified For

LOCKHART, ELESHA J PH#: 803-783-2381

Fac. Cont. Email: EJL75@SCDNH.ORG

CRC-1421 / 01/31/2010

Richland / State

5640 LOWER RICHLAND BLVD

HOPKINS, SC 29061

PIEDMONT CENTER FOR MENTAL HEALTH SERVICES

Total Number of Licensed Beds 15

Resident Beds: 15 **Resident Rooms** 8 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

PINEDALE RESIDENTIAL CENTER

798 HERMITAGE POND RD

CAMDEN, SC 29526

HUDSON, PHILLIP E PH#: 803-432-9900 Fac. Cont. Email: No Fac. Cont. Email on record CRC-0460 / 02/28/2010

Kershaw / Corporation 798 HERMITAGE POND RD

CAMDEN, SC 29020

SHARECARE CORPORATION

Certified For

Total Number of Licensed Beds 50

Resident Beds: 50 **Resident Rooms** 34 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

PINEWOOD HOUSE

101 CENTENNIAL BLVD GOOSE CREEK, SC 29445

JOHNS, JIMMY C PH#: 843-569-2520

Fac. Cont. Email: PINEWOODHOUSE@ALCCO.COM

CRC-1406 / 11/30/2009 Berkeley / Corporation 101 CENTENNIAL BLVD

GOOSE CREEK, SC 29445 ASSISTED LIVING CONCEPTS INC

Certified For Alzheimers Care

Total Number of Licensed Beds 44

Resident Beds: 44 **Resident Rooms** 39 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

PLACE AT CONWAY

872 SINGLETON RIDGE RD

CONWAY, SC 29526-0000

MURPHY, LANELLE M PH#: 843-347-3050 Fac. Cont. Email: MURPHY8075@YAHOO.COM

Certified For

CRC-1204 / 04/30/2010 Horry / Ltd. Liability

872 SINGLETON RIDGE RD CONWAY, SC 29526

RGL DEVELOPMENT L L C

Total Number of Licensed Beds 52

Resident Beds: 52 **Resident Rooms** 42 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0

0 Other Rooms:

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

PONDVIEW RESIDENTIAL CARE HOME #1

5342 HARDSCRABBLE RD BLYTHEWOOD, SC 29016

THOMAS, KATHERINE PH#: 803-735-0420 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0378 / 04/30/2009 Richland / Sole Proprietorship

PO BOX 544

BLYTHEWOOD, SC 29016 KATHERINE W THOMAS

Total Number of Licensed Beds 12

Resident Beds: 12 Resident Rooms 6 Staff Beds: 2 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

PONDVIEW RESIDENTIAL CARE HOME #2

5338 HARDSCRABBLE RD BLYTHEWOOD, SC 29016

THOMAS, KATHERINE PH#: 803-735-0420 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1190 / 11/30/2009 Richland / Sole Proprietorship

PO BOX 544

BLYTHEWOOD, SC 29016 KATHERINE W THOMAS

Total Number of Licensed Beds 5

Resident Beds: 5 **Resident Rooms** 4 2 Staff Beds: Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

PORT ROYAL COMMUNITY RESIDENCE

1508 OLD SHELL RD

PORT ROYAL, SC 29935-1705 MAYSE, WANDA PH#: 843-525-7684

Fac. Cont. Email: WMAYSE@BCGOV.NET

Certified For

CRC-1173 / 08/31/2009

Beaufort / State PO BOX 4706

COLUMBIA, SC 29240-4706

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 15

Resident Beds: 15 8 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

PRESBYTERIAN HOME OF SOUTH CAROLINA-CLINTON (CRCF)

801 MUSGROVE ST

CLINTON, SC 29325-0000

SNIDER, ANN T PH#: 864-833-5190

Fac. Cont. Email: ASNIDER@PRESHOMESC.ORG

Certified For

CRC-0014 / 04/30/2009

Laurens / Non-Profit Corporation

801 MUSGROVE ST CLINTON, SC 29325

PRESBYTERIAN HOME OF SOUTH CAROLINA INC

Total Number of Licensed Beds 81

Resident Beds: 81 Resident Rooms 81 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

PRESBYTERIAN HOME OF SOUTH CAROLINA-COLUMBIA HOME (CRCF)

700 DAVEGA DR

LEXINGTON, SC 29073-9698

BURTON, EDWARD G PH#: 803-796-8700

Fac. Cont. Email: EGBURTON@LAURELBAYE.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-0387 / 06/30/2009

Lexington / Non-Profit Corporation

700 DAVEGA DR

LEXINGTON, SC 29073

PRESBYTERIAN HOME OF SOUTH CAROLINA INC

Total Number of Licensed Beds 58

0

Resident Beds: 58 Staff Beds: 0

Other Beds:

Resident Rooms 58 0 Staff Rooms:

Other Rooms: 0

PRESBYTERIAN HOME OF SOUTH CAROLINA-FLORENCE

2350 W LUCAS ST

Certified For

FLORENCE, SC 29501-1201

HICKMAN III, WALTER E PH#: 843-665-2222

Fac. Cont. Email: WHICKMAN@PRESHOMESC.ORG

CRC-0242 / 09/30/2009

Florence / Non-Profit Corporation

2350 W LUCAS ST FLORENCE, SC 29501

PRESBYTERIAN HOME OF SOUTH CAROLINA INC

Total Number of Licensed Beds 34

Resident Beds: 34 **Resident Rooms** 30 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

PRESBYTERIAN HOME OF SOUTH CAROLINA-FOOTHILLS (CRCF)

205 BUD NALLEY DR

EASLEY, SC 29642

MIZE, SIDNEY K PH#: 864-859-3367

Fac. Cont. Email: JLEHEUP@PRESHOMESC.ORG

CRC-1030 / 07/31/2009

Pickens / Non-Profit Corporation

205 BUD NALLEY DR EASLEY, SC 29642

PRESBYTERIAN HOME OF SOUTH CAROLINA INC

Certified For Alzheimers Care Total Number of Licensed Beds 32

> Resident Beds: 32 **Resident Rooms** 32 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

QUALITY CARE RESIDENTIAL HOME

107 ETLING AVE

GOOSE CREEK, SC 29445

ESPANO, FE B PH#: 843-863-0209

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0715 / 05/31/2009 Berkeley / Partnership

107 ETLING AVE

GOOSE CREEK, SC 29445 CLARO L AND FE B ESPANO

Total Number of Licensed Beds 29

Resident Beds: 29 **Resident Rooms** 25 0 Staff Rooms: 0 Staff Beds: Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

QUIET ACRES RETIREMENT HOME

2968 OLD DOUGLAS MILL RD

HODGES 29653

Certified For

JOHNSON, MINNIE G PH#: 864-459-9892

Fac. Cont. Email: QUIETACRESRESTHOME@YAHOO.COM

CRC-0588 / 05/31/2009

Greenwood / Sole Proprietorship

2968 OLD DOUGLAS MILL RD

HODGES, SC 29653 MINNIE G JOHNSON

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5 Staff Beds: 2 2 Staff Rooms: 0

Other Beds:

Other Rooms: 0

RAM BAY RESIDENTIAL CARE FACILITY

1380 WILLIAMS ACRES LN MANNING, SC 29102

WILLIAMS, EARTHA Y PH#: 803-473-2349 Fac. Cont. Email: No Fac. Cont. Email on record CRC-1284 / 07/31/2008 (Renewal Pending)

Clarendon / Sole Proprietorship

PO BOX 383

MANNING, SC 29102 EARTHA Y WILLIAMS

Certified For Alzheimers Care

Total Number of Licensed Beds 5

Resident Beds: 5 **Resident Rooms** 3 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

RAPHA RESIDENTIAL CARE

3959 FISH HATCHERY RD GASTON, SC 29053-9038

MANSELL, DAVID C PH#: 803-755-6541

Fac. Cont. Email: RAPHA@SURFBEST.NET

CRC-1283 / 04/30/2010

Lexington / Limited Liability Limited Partnership

3959 FISH HATCHERY RD GASTON, SC 29053

MASTERMIND LIMITED PARTNERSHIP L L P

Certified For

Total Number of Licensed Beds 92

Resident Beds: 92 **Resident Rooms** 73 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

REESE'S COMMUNITY CARE HOME #1

1203 MULLER AVE COLUMBIA, SC 29203

MITCHELL, JACKIE R PH#: 803-786-1843

Fac. Cont. Email: JREESE1904@AOL.COM

Certified For

CRC-0053 / 03/31/2009 (Renewal Pending)

Richland / Corporation 1203 MULLER AVE COLUMBIA, SC 29203

REESE'S COMMUNITY CARE HOME INC

Total Number of Licensed Beds

Resident Beds: 8 Resident Rooms 4 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

REESE'S COMMUNITY CARE HOME #2

717 CINDY DR

COLUMBIA, SC 29201

REESE, ROBERT V PH#: 803-754-9798

Fac. Cont. Email: J.REESE1904@AOL.COM

Certified For

CRC-0054 / 03/31/2009 (Renewal Pending)

Richland / Corporation

1203 MULLER AVE

COLUMBIA, SC 29203

REESE'S COMMUNITY CARE HOME INC

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 2 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

REFLECTIONS AT CAROLINA FOREST

219 MIDDLEBURG DR

MYRTLE BEACH, SC 29579

CLARDY JR, WALLACE D PH#: 843-997-0773

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1456 / 11/30/2009

Horry / Corporation 219 MIDDLEBURG DR

MYRTLE BEACH, SC 29579

REFLECTIONS AT CAROLINA FOREST INC

Certified For Alzheimers Care

Total Number of Licensed Beds 42

Resident Beds: 42 Resident Rooms 30 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

REID HOUSE

117 DODD ST

WELLFORD, SC 29385

DANIELS, KEISHA PH#: 864-949-5120

Fac. Cont. Email: THEREIDHOUSEINC@AOL.COM

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CRC-1463 / 01/31/2009 (Renewal Pending)

Spartanburg / Corporation 410 ROLLING PINES LN DUNCAN, SC 29334 REID HOUSE INC

Certified For Total Number of Licensed Beds 42

Resident Beds: 42 Resident Rooms 21
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

REID'S RESIDENTIAL CARE FACILITY

726 OLD SPARTANBURG HWY

WELLFORD, SC 29385

DANIELS, JUDY C PH#: 864-439-9238

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0771 / 05/31/2009

Spartanburg / Sole Proprietorship 726 OLD SPARTANBURG HWY

WELLFORD, SC 29385

JUDY DANIELS

Total Number of Licensed Beds 23

Resident Beds: 23 Resident Rooms 10 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

RESPITE HOME AT ROCK HILL

938 SALUDA ST

ROCK HILL, SC 29730

WILMORE, VIRGINIA M PH#: 803-366-1322

Fac. Cont. Email: VCCWMIN@COMPORIUM.NET

Certified For Alzheimers Care

CRC-1279 / 06/30/2009 York / Non-Profit Corporation

938 SALUDA ST

ROCK HILL, SC 29730

REVELATION CHRISTIAN CHURCH WHOLISTIC MINISTRIES OF ROCK

HILL

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

RESTING PLACE #1

207 E SHOCKLEY FERRY RD ANDERSON, SC 29624

TOUCHTON, MARY S PH#: 864-226-0990

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0499 / 11/30/2009

Anderson / Sole Proprietorship

PO BOX 13866

ANDERSON, SC 29624 MARY SIMS TOUCHTON

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

RESTORATION PLACE

600 PINEY WOODS RD COLUMBIA, SC 29210

SMITH, SANDRA S PH#: 803-873-9601

Fac. Cont. Email: SANDYSHAWSMITH@AOL.COM

rac. Cont. Email: SA

CRC-1434 / 02/28/2009 (Renewal Pending)

Richland / Sole Proprietorship

141 SANDSTONE RD COLUMBIA, SC 29212

SANDRA S SMITH

Certified For Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 2 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

RHAMES RESIDENTIAL CARE HOME

343 E CHURCH ST MULLINS, SC 29574

BURGESS, SANDY M PH#: 843-464-2585

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1436 / 03/31/2009 (Renewal Pending)

Marion / Sole Proprietorship

PO BOX 6023

FLORENCE, SC 29502 BURGESS, SANDY

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 2
Staff Beds: 1 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

RIDGEVIEW COMMUNITY CARE HOMES INC UNIT A

217 CHANDLER RD GREER 29651

DAUGHERTY, PATRICIA L PH#: 864-877-8599

Fac. Cont. Email: RIDGEVIEW1@MSN.COM

Certified For

CRC-0559 / 01/31/2010 Greenville / Corporation 217 CHANDLER RD GREER, SC 29651

RIDGEVIEW COMMUNITY CARE HOMES INC

Total Number of Licensed Beds 11

Resident Rooms Resident Beds: 11 6 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

RIDGEVIEW COMMUNITY CARE HOMES INC UNIT B

217 CHANDLER RD GREER 29651

DAUGHERTY, PATRICIA L PH#: 864-877-8599

Fac. Cont. Email: RIDGEVIEW1@MSN.COM

Certified For

CRC-0560 / 01/31/2010 Greenville / Corporation 217 CHANDLER RD GREER, SC 29651

RIDGEVIEW COMMUNITY CARE HOMES INC

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 5 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

RIDGEVIEW COMMUNITY CARE HOMES INC UNIT C

217 CHANDLER RD **GREER 29651**

DAUGHERTY, PATRICIA L PH#: 864-877-8599

Fac. Cont. Email: RIDGEVIEW1@MSN.COM

Certified For

CRC-0561 / 01/31/2010 Greenville / Corporation 217 CHANDLER RD GREER, SC 29651

RIDGEVIEW COMMUNITY CARE HOMES INC

Total Number of Licensed Beds 11

Resident Beds: 11 **Resident Rooms** 6 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

RIDGEVIEW COMMUNITY CARE HOMES INC UNIT D

217 CHANDLER RD GREER 29651

DAUGHERTY, PATRICIA L PH#: 864-877-8599

Fac. Cont. Email: RIDGEVIEW1@MSN.COM

Certified For

April 2, 2009

CRC-0562 / 01/31/2010 Greenville / Corporation 217 CHANDLER RD GREER, SC 29651

RIDGEVIEW COMMUNITY CARE HOMES INC

Total Number of Licensed Beds 11

Resident Beds: 11 **Resident Rooms** 6 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

RILEY'S RESIDENTIAL CARE HOME

2327 BRIAN CHRISTOPHER RD GREAT FALLS, SC 29055-8844

GOODE-RILEY, BEVERLY PH#: 803-482-3290

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0900 / 10/31/2008 (Renewal Pending)

Chester / Sole Proprietorship 2327 BRIAN CHRISTOPHER RD GREAT FALLS, SC 29055-8844

BEVERLY GOODE-RILEY

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

RIVER OAKS RESIDENTIAL CARE INC

1251 LADY'S ISLAND DR PORT ROYAL, SC 29935-1128

AUSTIN, TIMOTHY D PH#: 843-521-2298

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-0733 / 09/30/2009 Beaufort / Corporation

1251 LADY'S ISLAND DR PORT ROYAL, SC 29935

RIVER OAKS RESIDENTIAL CARE INC

Total Number of Licensed Beds 62

Resident Beds: 62 Resident Rooms 48
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

RIVERDALE RESIDENTIAL CARE FACILITY

412 PEE DEE CHURCH RD

DILLON, SC 29536

MCKINLEY, MITCHELL PH#: 843-774-0623

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-0528 / 06/30/2009

Dillon / Sole Proprietorship 412 PEE DEE CHURCH RD

DILLON, SC 29536 MITCHELL MCKINLEY

Total Number of Licensed Beds 30

Resident Beds: 30 Resident Rooms 16
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

ROBIN'S RESIDENTIAL CARE FACILITY

1216 HYATT AVE

COLUMBIA, SC 29203

JAMISON, LILLIAN R PH#: 803-754-5097

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0516 / 08/31/2009 Richland / Corporation

PO BOX 3082

COLUMBIA, SC 29230-3082 ROBIN'S RESIDENTIAL CARE INC

Total Number of Licensed Beds 9

Resident Beds: 9 Resident Rooms 3
Staff Beds: 4 Staff Rooms: 3
Other Beds: 0 Other Rooms: 0

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April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-0800 / 01/31/2010

ROCKHAVEN COMMUNITY CARE HOME

524 ROCKHAVEN DR COLUMBIA, SC 29223

Certified For

BARNES, RICHIE D PH#: 803-699-5361 Fac. Cont. Email: RBARNES5@SC.RR.COM Richland / Sole Proprietorship 524 ROCKHAVEN DR COLUMBIA, SC 29223 RICHIE D BARNES

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 4 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

ROCKY RIVER BAPTIST ASSOCIATION RESIDENTIAL CARE HOME

250 UNION HIGH DR BELTON, SC 29627 HASIUK, JANICE E PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1270 / 04/30/2010

Anderson / Non-Profit Corporation

250 UNION HIGH DR BELTON, SC 29627

ROCKY RIVER BAPTIST ASSOCIATION

Certified For Alzheimers Care Total Number of Licensed Beds 28

> Resident Beds: 28 **Resident Rooms** 15 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

ROLLING GREEN VILLAGE ASSISTED LIVING FACILITY

1 HOKE SMITH BLVD GREENVILLE, SC 29

CAMPBELL, TAMERYN A PH#: 864-213-4222

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0573 / 03/31/2010 Greenville / Corporation

1 HOKE SMITH BLVD GREENVILLE, SC 29615

CRC-1208 / 07/31/2009

200 FORTRESS DR

INMAN, SC 29349

Spartanburg / Corporation

GREENVILLE BAPTIST RETIREMENT COMMUNITY INC

Certified For Alzheimers Unit Total Number of Licensed Beds 74

> Resident Beds: 74 **Resident Rooms 72** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

> > LUTHERAN HOMES OF SOUTH CAROLINA INC

ROSECREST COMMUNITY RESIDENTIAL CARE

200 FORTRESS DR INMAN, SC 29349

MILLER, RICHARD P PH#: 803-581-3151

Fac. Cont. Email: RICHARD.MILLER@CRMCSC.HMA-CORP.COM

Certified For Alzheimers Care Total Number of Licensed Beds 59

> Alzheimers Unit Resident Beds: 59 **Resident Rooms** 59 0 Staff Rooms: 0 Staff Beds: 0

Other Beds: 0 Other Rooms:

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

ROSEDALE COMMUNITY CARE HOME

107 MONTGOMERY ST CAMPOBELLO, SC 29322

GARLAND, MICHELLE A PH#: 864-472-6191

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0074 / 02/28/2010

Spartanburg / Sole Proprietorship

PO BOX 363

CAMPOBELLO, SC 29322

JOHN D GARLAND

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 3 Staff Beds: 3 3 Staff Rooms: Other Beds: 0 Other Rooms: 0

ROSEWOOD ASSISTED LIVING

5221 HWY 215

PAULINE, SC 29374

CLOBES, KIMBERLY H PH#: 864-573-4060

Fac. Cont. Email: WIJG38@AOL.COM

Certified For Alzheimers Care

CRC-1367 / 11/30/2009

Spartanburg / Ltd. Liability

PO BOX 35

PAULINE, SC 29374

ROSEWOOD ASSISTED LIVING LLC

Total Number of Licensed Beds 67

Resident Beds: 67 **Resident Rooms** 33 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

ROUSE COMMUNITY CARE HOME #1

102 BALLENTON RD COLUMBIA, SC 29203

ROUSE, CHARLENE E PH#: 803-788-1753

Fac. Cont. Email: MATRICEROUSE@AOL.COM

CRC-0327 / 12/31/2009 Richland / Corporation

PO BOX 134

STATE PARK, SC 29147

ROUSE COMMUNITY CARE HOME INC

Certified For Total Number of Licensed Beds

> **Resident Beds:** 8 **Resident Rooms** 4 Staff Rooms: Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

ROUSE COMMUNITY CARE HOME #2

8809 WILSON BLVD COLUMBIA, SC 29203

ROUSE, MATRICE S PH#: 803-786-9357

Fac. Cont. Email: MATRICEROUSE@AOL.COM

Certified For

CRC-0328 / 12/31/2009

Richland / Corporation

PO BOX 134

STATE PARK, SC 29147

ROUSE COMMUNITY CARE HOME INC

Total Number of Licensed Beds

Resident Beds: 9 Resident Rooms 4 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-0238 / 09/30/2009

Richland / Corporation

PO BOX 134

ROUSE COMMUNITY CARE HOME #3

9316 WILSON BLVD COLUMBIA, SC 29203

ROUSE, CHARLENE E PH#: 803-754-5720

Fac. Cont. Email: MATRICEROUSE@AOL.COM

Certified For

STATE PARK, SC 29147

ROUSE COMMUNITY CARE HOME INC

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 3 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

ROYAL OAKS RESIDENTIAL CARE

950 TRAVELERS BLVD SUMMERVILLE, SC 29485

KILMER, CATHERINE O PH#: 843-832-8481 Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds 53

SUMMERVILLE, SC 29485

ROYAL OAKS RESIDENTIAL CARE INC

CRC-0859 / 03/31/2010

Dorchester / Corporation

950 TRAVELERS BLVD

Resident Beds: 53 **Resident Rooms** 47 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

Certified For Alzheimers Care

RUDNICK CRCF

Certified For

629 CHESTERFIELD ST AIKEN, SC 29801

MCKENZIE, WILLIE M PH#: 803-642-1041

Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds 8 **Resident Beds:** 8 **Resident Rooms**

CRC-0791 / 11/30/2009

Bamberg / Corporation

DENMARK, SC 29042

RUMPH'S RESIDENTIAL CARE INC

PO BOX 383

AIKEN, SC 29802-0698

CRC-1429 / 02/28/2010

Aiken / County

PO BOX 698

Staff Rooms: Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

TRI-DEVELOPMENT CENTER OF AIKEN COUNTY INC

4

RUMPH'S RESIDENTIAL CARE

574 PROGRESSIVE ST DENMARK, SC 29042

COLLINS, SEBRINA C PH#: 803-793-0068

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Total Number of Licensed Beds

> Resident Beds: 8 **Resident Rooms** 3 Staff Beds: 0 Staff Rooms: 0 0

Other Beds: 0 Other Rooms:

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

S M STRONG'S COMMUNITY RESIDENTIAL CARE

65 DOVE ST

KINGSTREE, SC 29556

JACKSON, JACQUES G PH#: 843-426-4723

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1195 / 02/28/2010

Williamsburg / Sole Proprietorship

PO BOX 173

KINGSTREE, SC 29556-0173

SUSIE M STRONG

Total Number of Licensed Beds

Resident Beds: 5 Resident Rooms 3 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

SANDERS CRCF

625 CHESTERFIELD ST AIKEN, SC 29801

MCKENZIE, WILLIE M PH#: 803-642-1041

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1430 / 02/28/2010

Aiken / County

PO BOX 698

AIKEN, SC 29802-0698

TRI-DEVELOPMENT CENTER OF AIKEN COUNTY INC

Certified For

Total Number of Licensed Beds 8

Resident Beds: 8 **Resident Rooms** 4 0 Staff Beds: 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

SANDPIPER COURT YARD LLC

1047 ANNA KNAPP BLVD MT PLEASANT, SC 29464

JANSE, SHEENA M PH#: 843-884-7977

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1325 / 09/30/2009 Charleston / Ltd. Liability 1047 ANNA KNAPP BLVD

MT PLEASANT, SC 29464

SANDPIPER INDEPENDENT & ASSISTED LIVING L L C

Total Number of Licensed Beds 64

Resident Beds: 64 54 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

SAVANNAH HALL ASSISTED LIVING

1010 LAKE HUNTER CIR MT PLEASANT, SC 29464

DEFOOR, KENNETH E PH#: 843-388-2030 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1431 / 12/31/2009 Charleston / Corporation

300 N GREENE ST STE 1000 GREENSBORO, NC 27401

SAVANNAH GRACE HALLS L P

Total Number of Licensed Beds 32

Resident Beds: 32 **Resident Rooms** 28 Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0

0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-1410 / 11/30/2009

Charleston / Corporation

1501 SECESSIONVILLE RD

JAMES ISLAND, SC 29412-7200

ASSISTED LIVING CONCEPTS INC

SAVANNAH HOUSE

Certified For

1501 SECESSIONVILLE RD JAMES ISLAND, SC 29412-7200 DICKEY, LISA A PH#: 843-762-1396

Fac. Cont. Email: SAVANNAHHOUSE@ALCCO.COM

Total Number of Licensed Beds 44

Resident Beds: 44 Resident Rooms 39 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

SC EPISCOPAL HOME AT STILL HOPES (CRCF)

1 STILL HOPES DR

WEST COLUMBIA, SC 29171 LONG, MARY K PH#: 803-796-6490

Fac. Cont. Email: LSEGARS@SCEH.ORG

Certified For Alzheimers Care

Alzheimers Unit

CRC-0144 / 07/31/2009

Lexington / Corporation

PO BOX 2959

WEST COLUMBIA, SC 29171-2959 SC EPISCOPAL HOME AT STILL HOPES

Total Number of Licensed Beds 71

Resident Beds: 71 **Resident Rooms** 71 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

SECESSIONVILLE COMMUNITY RESIDENCE

1217 SECESSIONVILLE RD CHARLESTON, SC 29412

SIMMONS, CYNTHIA Y PH#: 843-762-2134

Fac. Cont. Email: DGOLDMINTZ@DSNCC.COM

CRC-1287 / 12/31/2010

Charleston / State

PO BOX 22708

CHARLESTON, SC 29413-2708

DISABILITIES BOARD OF CHARLESTON COUNTY

Certified For Total Number of Licensed Beds

> **Resident Beds:** 8 **Resident Rooms** 8 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

SENECA RESIDENTIAL CARE CENTER

126 TOKEENA RD SENECA, SC 29679

HAMMERS, WILBURN E PH#: 864-882-7390 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-0337 / 12/31/2009 Oconee / Sole Proprietorship

PO BOX 428

SENECA, SC 29679 WILBURN E HAMMERS

Total Number of Licensed Beds 33

Resident Beds: 33 **Resident Rooms** 27 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

SERENITY MANOR

4018 S RHETT AVE

NORTH CHARLESTON, SC 29405 FIELDS, HATTIE B PH#: 843-425-4422

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1472 / 02/28/2010

Charleston / Sole Proprietorship

PO BOX 623

JOHNS ISLAND, SC 29457

FIELDS, HATTIE B

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

SEVILLE'S RESIDENTIAL CARE FACILITY

109 BENNETT LN

HAMPTON, SC 29924-1375

JENKINS, GENORA W PH#: 803-943-9131

Fac. Cont. Email: PEPPERFORCE@YAHOO.COM

Certified For

CRC-1178 / 08/31/2009

Hampton / Sole Proprietorship

109 BENNETT LN

HAMPTON, SC 29924-1375

GENORA W JENKINS

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 6 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

SHADOW OAKS ASSISTED LIVING COMMUNITY

108 GREGG AVE AIKEN, SC 29801

WILLIAMS, SANDRA G PH#: 803-643-0300

Fac. Cont. Email: SWILLIAMS@SHADOW-OAKS.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1425 / 10/31/2009 Aiken / Ltd. Liability 108 GREGG AVE

AIKEN, SC 29801

SHADOW OAKS ASSISTED LIVING COMMUNITY LLC

Total Number of Licensed Beds 56

Resident Beds: 56 **Resident Rooms** 56 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

SHEPHARD S CARE RESIDENTIAL FACILITY

141 HUDSON RD

SAINT GEORGE, SC 29477

HEZEKIAH, CATHERINE PH#: 843-563-8959

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1476 / 05/31/2009

Dorchester / Corporation

141 HUDSON RD

SAINT GEORGE, SC 29477

SHEPHARDS CARE RESIDENTIAL FACILITY

Certified For Total Number of Licensed Beds

> Resident Beds: 5 Resident Rooms 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

SHEPHERD'S CARE CENTER LLC 2100 NORTH PLEASANTBURG DR

GREENVILLE, SC 29609

THOMPSON, ERIC M PH#: 864-322-6212 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1326 / 10/31/2009 Greenville / Ltd. Liability

2100 NORTH PLEASANTBURG DR

GREENVILLE, SC 29609 SHEPHERD'S CARE CENTER LLC

Total Number of Licensed Beds 90

Resident Rooms Resident Beds: 90 58 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

SHERMAN RESIDENTIAL CARE

20 MAYFIELD ST

GREENVILLE, SC 29601-0000

SHERMAN, OLISE S PH#: 864-242-0401

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1070 / 03/31/2010

Greenville / Partnership 20 MAYFIELD ST

GREENVILLE, SC 29601

JESSE B SHERMAN SR AND OLISE SHERMAN

Total Number of Licensed Beds 16

Resident Beds: 16 **Resident Rooms** 8 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

SIX MILE RETIREMENT CENTER

120 S MAIN ST

SIX MILE, SC 29682

YORK, EDNA J PH#: 864-868-9050

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0542 / 09/29/2009

Pickens / Sole Proprietorship

PO BOX 210

SIX MILE, SC 29682 WILBURN E HAMMERS

Certified For Total Number of Licensed Beds 41

> Resident Beds: 41 **Resident Rooms** n Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

SKYLYN PLACE PERSONAL CARE CENTER

1705 SKYLYN DR

SPARTANBURG, SC 29307-1077

BARRESI, TIMOTHY J PH#: 864-582-6838

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-0856 / 01/31/2010

Spartanburg / Corporation

3131 ELLIOTT AVE STE 500

SEATTLE, WA 98121 **EMERITUS CORPORATION**

Total Number of Licensed Beds 169

Resident Beds: 169 Resident Rooms 169 Staff Beds: Staff Rooms: 0 0 0

Other Beds: 0 Other Rooms:

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

SOMERBY OF MOUNT PLEASANT

3100 TRADITION CIR

MOUNT PLEASANT, SC 29466

GILLESPIE, CRIS J PH#: 843-849-3096

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1481 / 09/30/2009 Charleston / Ltd. Liability

2700 CORPORATE DR STE 125

BIRMINGHAM, AL 35242

DOMINION SENIOR LIVING OF MT PLEASANT LLC

Total Number of Licensed Beds 118

Resident Beds: 118 Resident Rooms 91 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

SOUTH ISLAND ASSISTED LIVING

2902 S ISLAND RD

GEORGETOWN, SC 29440

GILES, MAXINE J PH#: 843-545-5427 Fac. Cont. Email: MAXINE@SCCC.TV

Certified For Alzheimers Care

CRC-1272 / 02/28/2010

Georgetown / Corporation

2902 S ISLAND RD

GEORGETOWN, SC 29440 OAK POND MANOR INC

Total Number of Licensed Beds 32

Resident Beds: 32 **Resident Rooms** 16 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

SOUTHERN HERITAGE

1713 CHARLESTON HWY

WEST COLUMBIA, SC 29169

DOUGLAS SR, JONATHAN PH#: 803-796-3113 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0993 / 03/31/2010 Lexington / Corporation

PO BOX 25215

COLUMBIA, SC 29224

QUALITY CARE SERVICES INC

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 4 **Staff Rooms:** Staff Beds: 1 1 Other Beds: 0 Other Rooms: 0

SOUTHERN OAKS PERSONAL CARE HOME

120 ROPER MOUNTAIN RD EXT

GREENVILLE, SC 29615

BOUDREAU, GAIL R PH#: 864-288-3271 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-0611 / 12/31/2009

Greenville / Corporation

120 ROPER MOUNTAIN RD EXT

GREENVILLE, SC 29615 EASTSIDE MANOR INC

Total Number of Licensed Beds 64

Resident Beds: 64 Resident Rooms 58 0 Staff Rooms: 0 Staff Beds: Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

Certified For

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1155 / 04/30/2010

425 S WHEELER AVE

ROY L BOWERS SR

Newberry / Sole Proprietorship

SOUTHSIDE RESIDENTIAL CARE

425 S WHEELER AVE PROSPERITY, SC 29127

BOSTON, TONJA L PH#: 803-364-0022 Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds 30

CRC-1392 / 04/30/2010

1800 INDIA HOOK RD

ROCK HILL, SC 29732

SPRING ARBOR SENIOR LIVING LLC

York / Ltd. Liability

PROSPERITY, SC 29127

Resident Beds: 30 Resident Rooms 12 Staff Beds: 2 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

SPRING ARBOR ASSISTED LIVING & MEMORY CARE COMMUNITY

1800 INDIA HOOK RD ROCK HILL 29732

ELLIS, ROBIN L PH#: 803-325-1144

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care Total Number of Licensed Beds 92

> **Alzheimers Unit** Resident Beds: 92 Staff Beds:

Resident Rooms 60 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

Berkeley / Limited Liability Limited Partnership

SPRING ARBOR OF DANIEL ISLAND

320 SEVEN FARMS DR

DANIEL ISLAND, SC 29492-7532 LEMMONS, PAULEE F PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

320 SEVEN FARMS DR

CRC-0893 / 10/31/2009

SPARTANBURG, SC 29307

H H HUNT ASSISTED LIVING INC

104 DILLON DR

CRC-1282 / 06/30/2009

DANIEL ISLAND, SC 29492-7532

SPRING ARBOR OF DANIEL ISLAND LIMITED PARTNERSHIP

Certified For Total Number of Licensed Beds 76

> Resident Beds: 76 59 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

> > Spartanburg / Limited Liability Limited Partnership

SPRING ARBOR OF SPARTANBURG

104 DILLON DR

SPARTANBURG, SC 29307 FENNELL, ERIC J PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Total Number of Licensed Beds 55

> Resident Beds: 55 **Resident Rooms** 36 0 Staff Rooms: 0 Staff Beds: Other Beds: 0 Other Rooms: 0

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DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

SPRINGFIELD PLACE RESIDENTIAL CARE

2006 SPRINGFIELD CIR NEWBERRY, SC 29108

PARKS, LESLIE D PH#: 803-276-2601

Fac. Cont. Email: MBURSINGER@CS.COM

Certified For

CRC-1250 / 05/31/2009
Newberry / County
2006 SPRINGFIELD CIR
NEWBERRY, SC 29108
NEWBERRY COUNTY

Total Number of Licensed Beds 50

Resident Beds: 50 Resident Rooms 40 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

SPRINGHILL ASSISTED LIVING RETIREMENT COMMUNITY INC

514 S GUM ST

PAGELAND, SC 29728

ROBERTSON SR, ROBBIE L PH#: 843-675-2500 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1171 / 07/31/2009 Chesterfield / Corporation

514 S GUM ST

PAGELAND, SC 29728

SPRINGHILL ASSISTED LIVING RETIREMENT COMMUNITY INC

Total Number of Licensed Beds 32

Resident Beds: 32 Resident Rooms 22 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

SPRINGS AT SIMPSONVILLE

214 E CURTIS ST

SIMPSONVILLE, SC 29681

DEWITT, JAMES A PH#: 864-962-8570

Fac. Cont. Email: JIMD@CARAVITA.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1198 / 05/31/2009 Greenville / Ltd. Liability 214 E CURTIS ST

SIMPSONVILLE, SC 29681

CURTIS GROUP L L C

Total Number of Licensed Beds 69

Resident Beds: 69 Resident Rooms 42 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

STEPHANIE'S RESIDENTIAL CARE #2

10425 WILSON BLVD

BLYTHEWOOD, SC 29016

ROUSE, MATRICE S PH#: 803-735-1505

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1394 / 07/31/2009 Richland / Corporation 10425 WILSON BLVD BLYTHEWOOD, SC 29016

STEPHANIE RESIDENTIAL CARE INC

Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 4
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-1469 / 03/31/2010

Richland / Partnership

COLUMBIA, SC 29203

633 SHARPE RD

STEPHANIE'S RESIDENTIAL CARE #3

633 SHARPE RD COLUMBIA, SC 29203

PEOPLES, TIFFANY R PH#: 803-360-6593

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

Total Number of Licensed Beds

Resident Beds: 5 **Resident Rooms** 2 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

YVONNE HARRISON & TIFFANY PEOPLES

STEPHANIE'S RESIDENTIAL CARE FACILITY

4033 DELREE ST, PO BOX 31 WEST COLUMBIA, SC 29170

PEOPLES, TIFFANY R PH#: 803-356-7542 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1193 / 04/30/2010

Lexington / Sole Proprietorship 4033 DELREE ST, PO BOX 31 WEST COLUMBIA, SC 29170

YVONNE HARRISON

Total Number of Licensed Beds 12

Resident Beds: 12 **Resident Rooms** 6 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

STERLING HOUSE OF CENTRAL

131 VICKERY DR CENTRAL, SC 29630

REICHERS, LAURA J PH#: 864-653-4674

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1307 / 12/31/2009 Pickens / Corporation 131 VICKERY DR

CENTRAL, SC 29630

BROOKDALE SENIOR LIVING COMMUNITIES INC

Total Number of Licensed Beds 52

Resident Beds: 52 42 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

STERLING HOUSE OF GREENVILLE

2010 BRUSHY CREEK RD GREER, SC 29650

CINTRON, CONNIE S PH#: 864-244-9994

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1306 / 12/31/2009 Greenville / Corporation

2010 BRUSHY CREEK RD GREER, SC 29650

BROOKDALE SENIOR LIVING COMMUNITIES INC

Total Number of Licensed Beds 52

Resident Beds: 52 Resident Rooms 42 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

STERLING HOUSE OF GREENWOOD

1408 PKWY RD

GREENWOOD, SC 29646

ARMSTRONG, ASHLEY PH#: 864-223-2281

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1309 / 12/31/2009 Greenwood / Corporation

1408 PKWY RD

GREENWOOD, SC 29646

BROOKDALE SENIOR LIVING COMMUNITIES INC

Total Number of Licensed Beds 52

Resident Beds: 52 Resident Rooms 42
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

STERLING HOUSE OF HARBISON

51 WOODCROSS DR COLUMBIA, SC 29212

PAULINE, ANGELA K PH#: 803-755-7621

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1311 / 12/31/2009

Richland / Corporation 51 WOODCROSS DR COLUMBIA, SC 29212

BROOKDALE SENIOR LIVING COMMUNITIES INC

Total Number of Licensed Beds 52

Resident Beds: 52 Resident Rooms 52 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

STERLING HOUSE OF NORTH AUGUSTA

105 N HILLS DR

NORTH AUGUSTA, SC 29841

CHILDERS, JOEL A PH#: 803-819-0034

Fac. Cont. Email: JCHILDERS@BROOKDALELIVING.COM

CRC-1298 / 12/31/2009 Aiken / Corporation

105 N HILLS DR

NORTH AUGUSTA, SC 29841

BROOKDALE SENIOR LIVING COMMUNITIES INC

Certified For Alzheimers Care

Total Number of Licensed Beds 52

Resident Beds: 52 Resident Rooms 42 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

STERLING HOUSE OF PARKLANE

251 SPRINGTREE DR COLUMBIA, SC 29223

BREEDLOVE, NAOMI L PH#: 803-741-2600

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1310 / 12/31/2009

Richland / Corporation 251 SPRINGTREE DR

COLUMBIA, SC 29223

BROOKDALE SENIOR LIVING COMMUNITIES INC

Total Number of Licensed Beds 52

Resident Beds: 52 Resident Rooms 42 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

STERLING HOUSE OF ROCK HILL

1920 EBENEZER RD ROCK HILL, SC 29732

MCCUIN, KRISTI E PH#: 803-366-1189

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1308 / 12/31/2009 York / Corporation 1920 EBENEZER RD ROCK HILL, SC 29732

BROOKDALE SENIOR LIVING COMMUNITIES INC

Total Number of Licensed Beds 52

Resident Beds: 52 Resident Rooms 42
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

STERLING HOUSE OF SUMTER

1180 WILSON HALL RD SUMTER, SC 29150

HAM-BROWN, ELIZABETH PH#: 803-469-4508

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1312 / 12/31/2009 Sumter / Corporation 1180 WILSON HALL RD SUMTER, SC 29150

BROOKDALE SENIOR LIVING COMMUNITIES INC

Total Number of Licensed Beds 52

Resident Beds: 52 Resident Rooms 42 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

STOKES RESIDENTIAL CARE

2525 ST MATTHEWS RD ORANGEBURG, SC 29118

STOKES, ALBERT O PH#: 803-533-0070

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-0570 / 02/28/2010 Orangeburg / Partnership

1027 BERKELEY DR

ORANGEBURG, SC 29118-0000 ALBERT STOKES AND DELAURA STOKES

Total Number of Licensed Beds 17

Resident Beds: 17 Resident Rooms 9
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

SUMMER HOUSE

311 SIMPSON RD ANDERSON 29621

HUNTER, ANDREA M PH#: 864-261-3875

Fac. Cont. Email: ANDERSONPLACE-ED@EMERTUS.COM

Certified For

CRC-1303 / 03/31/2010 Anderson / Corporation 3131 ELLIOTT AVE, STE 500 SEATTLE, WA 98121

EMERITUS CORPORATION

Total Number of Licensed Beds 40

Resident Beds: 40 Resident Rooms 30 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

57

0

0

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1289 / 02/28/2010

916 WESLEY CT

JEJ & LFS L L C

Spartanburg / Ltd. Liability

SUMMER PLACE ASSISTED LIVING

916 WESLEY CT

Certified For

BOILING SPRINGS, SC 29316

VONHENNER, CHANCELLOR C PH#: 864-599-9929

Fac. Cont. Email: 1HOLL@DOVEHLC.COM

Total Number of Licensed Beds 65

BOILING SPRINGS, SC 29316

Resident Beds: 65 Resident Rooms
Staff Beds: 0 Staff Rooms:
Other Beds: 0 Other Rooms:

CRC-1113 / 09/30/2009

100 SUMMIT HILLS DR

CRC-1151 / 03/31/2010

Anderson / Ltd. Liability

ANDERSON, SC 29621

107 PERPETUAL SQUARE DR

EDEN GARDENS - ANDERSON

SUMMIT HILLS LLC

Spartanburg / Ltd. Liability

SPARTANBURG, SC 29307

SUMMIT HILLS ASSISTED LIVING COMMUNITY

100 SUMMIT HILLS DR

SPARTANBURG, SC 29307-0000 GIST, ANGELA S PH#: 864-591-2222

Fac. Cont. Email: ATHOMAS@SUMMIT-HILLS.COM

Certified For Alzheimers Care Total Number of Licensed Beds 57

Alzheimers Unit

Resident Beds: 57

Resident Rooms 48

Staff Beds: 0

Other Beds: 0

Other Rooms: 0

SUMMIT PLACE OF ANDERSON

107 PERPETUAL SQUARE

ANDERSON, SC 29621

ELLISTON, JOHN M PH#: 864-222-9880

Fac. Cont. Email: ED@SUMMITOFANDERSON.COM

Certified For Alzheimers Care Total Number of Licensed Beds 89

Alzheimers Unit Resident Beds: 89 Resident Rooms 70 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

SUMMIT PLACE OF BEAUFORT

1119 PICKPOCKET PLANTATION DR

BEAUFORT, SC 29902-0000

LEE-POTTER, KEARA N PH#: 843-770-0105

Fac. Cont. Email: KPOTTER@SDBELL.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1375 / 12/31/2009 Beaufort / Ltd. Liability

300 N GREENE ST STE 1000

GREENSBORO, NC 27401

SUMMIT PLACE OF BEAUFORT PROPERTY LLC

Total Number of Licensed Beds 87

Resident Beds: 87 Resident Rooms 72 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

SUMMIT PLACE OF NORTH MYRTLE BEACH

491 HWY 17

LITTLE RIVER, SC 29566

JENRETTE, DOROTHY L PH#: 843-399-5662

Fac. Cont. Email: DJENRETTE@SDBELL.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1360 / 06/30/2009 Horry / Ltd. Liability

491 HWY 17

LITTLE RIVER, SC 29566

BARRINGTON ON THE GREEN PROPERTIES LLC

Total Number of Licensed Beds 80

Resident Beds: 80 Resident Rooms 66 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

SUNCREST RESIDENTIAL CARE HOME

2385 PAMPLICO HWY FLORENCE, SC 29501

ROBERTS, ED E PH#: 843-662-0981

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1479 / 07/31/2009

Florence / Sole Proprietorship

PO BOX 465

FLORENCE, SC 29501

ROBERTS, ED

Total Number of Licensed Beds 47

Resident Beds: 47 **Resident Rooms** 33 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

SUNNY PINES BOARDING HOME

108 GAPWAY RD

ANDREWS, SC 29510

PAPILLION, GLORIA F PH#: 843-221-7436 Fac. Cont. Email: SUNNYPINES57@MSN.COM

Certified For

CRC-0098 / 05/31/2009

Georgetown / Sole Proprietorship

PO BOX 732

ANDREWS, SC 29510 MATTIE H DUROUSSEAU

Total Number of Licensed Beds 18

Resident Beds: 18 **Resident Rooms** 10 Staff Beds: Staff Rooms: 2 1 Other Beds: 0 Other Rooms: 0

SWEETGRASS COURT SENIOR LIVING COMMUNITY

1010 ANNA KNAPP BLVD

MOUNT PLEASANT, SC 29464

SCOTT, SHERRI R PH#: 843-971-7756

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1428 / 11/30/2009

Charleston / Limited Liability Company (multiple member)

PO BOX 3006 SALEM, OR 97302

MT PLEASANT OAKDALE I ALZ LLC

Total Number of Licensed Beds 38

Resident Beds: 38 **Resident Rooms** 38 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

CRC-1427 / 11/30/2009

Charleston / Ltd. Liability

PO BOX 3006

SALEM, OR 97302

SWEETGRASS VILLAGE ASSISTED LIVING COMMUNITY

601 MATHIS FERRY RD

MOUNT PLEASANT, SC 29464

SENYK, PHYLLIS G PH#: 843-881-9809

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0531 / 08/31/2009

CHARLESTON, SC 29414

CRC-0626 / 03/31/2010

LAKE VIEW, SC 29563

CRC-0935 / 06/30/2009

213 LAURENS ST N W

Aiken / Corporation

AIKEN, SC 29801

COOKE ARNETTE AND COOKE INC

Dillon / Corporation

702 W THIRD AVE

Charleston / Sole Proprietorship

MT PLEASANT OAKDALE II ALF LLC

Total Number of Licensed Beds 85

Resident Beds: 85 Resident Rooms 72 Staff Beds: 0 0 Staff Rooms: Other Rooms: 0

Other Beds: 0

1771 ELM RD

ADA R GADSDEN

TALL PINES ASSISTED LIVING

1771 ELM RD

Certified For

CHARLESTON, SC 29414

GADSDEN, ADA R PH#: 843-763-8134

Fac. Cont. Email: CGADSDEN@COMCAST.NET

Certified For Total Number of Licensed Beds 5

> Resident Beds: 5 **Resident Rooms** 3 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms:

0

THORNE RETIREMENT HOME

702 W 3RD AVE

LAKE VIEW, SC 29563-3302

SANDERSON, JAMES N PH#: 843-759-9099

Fac. Cont. Email: No Fac. Cont. Email on record

Total Number of Licensed Beds 76 **Certified For**

> Resident Beds: 76 40 **Resident Rooms Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

TRINITY LUTHERAN HOME

213 LAURENS ST NW AIKEN, SC 29801

HENRICH, CONSTANCE M PH#: 803-643-4200

Fac. Cont. Email: CHENRICH@TRINITYLUTHERANSC.ORG

Certified For Total Number of Licensed Beds 55

> Resident Beds: 55 **Resident Rooms** 55 Staff Beds: 0 Staff Rooms: 0

LUTHERAN HOMES OF SOUTH CAROLINA INC

0

Other Beds:

0

Other Rooms:

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

TRINITY PLACE

1267 N MAIN ST

SUMTER, SC 29150-0000

PICKENS, TIANITA PH#: 803-774-5700

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1442 / 05/31/2009

Sumter / Non-Profit Corporation

PO BOX 296

SUMTER, SC 29151

EMPOWERED PERSONAL CARE HOME HEALTH ALLIANCE INC

Certified For Total Number of Licensed Beds 79

> Resident Beds: 79 **Resident Rooms** 43 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

TURNING POINT CRCF

820 TOM'S CREEK RD HOPKINS, SC 29061

HANNIBAL, VICTORIA C PH#: 803-736-8053

Fac. Cont. Email: VCH47@SCDMH.ORG

CRC-1356 / 04/30/2009

Richland / State

820 TOM'S CREEK RD HOPKINS, SC 29061

PIEDMONT CENTER FOR MENTAL HEALTH SERVICES

Certified For Total Number of Licensed Beds 10

> Resident Beds: 10 **Resident Rooms** 0 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

TWILITE MANOR ADULT RESIDENTIAL CARE

2306 FOREST RD CAYCE, SC 29033

WEATHERFORD, JENNY G PH#: 803-794-7561

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1210 / 05/31/2009 Lexington / Ltd. Liability

2306 FOREST RD **CAYCE, SC 29033** DAVLAN L L C

Total Number of Licensed Beds 28 Certified For Alzheimers Care

> Resident Beds: 28 **Resident Rooms** 16 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

TWIN OAKS VILLA

4550 GREAT OAK DR

NORTH CHARLESTON, SC 29418-5001 ODOM, GRADY C PH#: 843-760-0831

Fac. Cont. Email: EMILYSB@COMCAST.NET

Certified For

CRC-1288 / 02/28/2010 Charleston / Ltd. Liability 4550 GREAT OAK DR

NORTH CHARLESTON, SC 29418

TWIN OAKS VILLA L L C

Total Number of Licensed Beds 80

Resident Beds: 80 **Resident Rooms** 60 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

TYLER RESTMORE HOME

1681 BROUGHTON ST ORANGEBURG, SC 29115

BLACK, EMILY T PH#: 803-536-0740

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-0841 / 09/30/2009

Orangeburg / Sole Proprietorship

1681 BROUGHTON ST ORANGEBURG, SC 29115

EMILY T BLACK

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 3
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

TYLER RESTMORE HOME #2

195 SELLERS AVE

ORANGEBURG, SC 29115

BLACK, EMILY T PH#: 803-531-2074

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0889 / 10/31/2009

Orangeburg / Sole Proprietorship

195 SELLERS AVE

Total Number of Licensed Beds

ORANGEBURG, SC 29115

EMILY T BLACK

Certified For Alzheimers Care

Resident Beds: 9 Resident Rooms 3
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

VANGUARD RESIDENTIAL SERVICES I

100 E HOSPITAL ST MANNING, SC 29102

RILEY, ROSALYN E PH#: 803-435-2330

Fac. Cont. Email: CCDSN@YAHOO.COM

rac. Cont. Email. Cobsine

CRC-1313 / 06/30/2009

Clarendon / Non-Profit Corporation

PO BOX 40

MANNING, SC 29102

VANGUARD RESIDENTIAL SERVICES INC

Certified For Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms 8
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

VANGUARD RESIDENTIAL SERVICES II

512 S CHURCH ST MANNING, SC 29102

RILEY, ROSALYN E PH#: 803-435-2330

Fac. Cont. Email: CCDSN@YAHOO.COM

Certified For

CRC-1314 / 06/30/2009

Clarendon / Non-Profit Corporation

PO BOX 40

MANNING, SC 29102

VANGUARD RESIDENTIAL SERVICES INC

Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

8

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

VANWYEVER RESIDENTIAL CARE FACILITY

2009 COSGROVE AVE

NORTH CHARLESTON, SC 29405

FULTON, RHODELLE W PH#: 843-744-6065

Fac. Cont. Email: VANWYEVER1@AOL.COM

Certified For

CRC-0638 / 06/30/2009

Charleston / Sole Proprietorship

PO BOX 71184

NORTH CHARLESTON, SC 29415-1184

RHODELLE W FULTON

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

VARNVILLE COMMUNITY RESIDENCE

266 HAMPTON RD VARNVILLE, SC 29944

MICKLE, DERRIEL PH#: 803-943-3305

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1211 / 05/31/2009

Hampton / State PO BOX 4706

COLUMBIA, SC 29240-4706

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

VICTORIAN HOME

313 WARLEY ST

FLORENCE, SC 29501

HOWARD, MARGARET P PH#: 843-664-3090

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-1487 / 03/31/2010

Florence / Sole Proprietorship

ADA O NWANKUDU

Certified For Total Number of Licensed Beds 5

Resident Beds: 5 Resident Rooms 3
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

VILLAGE AT SUMMERVILLE

201 W 9TH NORTH ST, UNIT 140

SUMMERVILLE, SC 29483

FIELDS, RICHARD E PH#: 843-873-2550

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0245 / 09/30/2009

Dorchester / Non-Profit Corporation 201 W 9TH NORTH ST, UNIT 140

SUMMERVILLE, SC 29483

PRESBYTERIAN HOME OF SOUTH CAROLINA

Total Number of Licensed Beds 114

Resident Beds: 114 Resident Rooms 90
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

April 2, 2009

Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

VILLAGE COMMUNITY CARE HOME-UNIT A

1250 SALEM CHURCH RD ANDERSON, SC 29623-5107

WILLIAMS, PHYLLIS S PH#: 864-225-4336

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0563 / 01/31/2010 Anderson / Corporation

PO BOX 5107

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

Total Number of Licensed Beds 11

Resident Beds: 11 **Resident Rooms** 6 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

VILLAGE COMMUNITY CARE HOME-UNIT B

1250 SALEM CHURCH RD ANDERSON, SC 29623-5107

WILLIAMS, PHYLLIS S PH#: 864-225-4336 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0564 / 01/31/2010

Anderson / Corporation

PO BOX 5107

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

Total Number of Licensed Beds 11

Resident Beds: 11 **Resident Rooms** 6 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

VILLAGE COMMUNITY CARE HOME-UNIT C

1250 SALEM CHURCH RD ANDERSON, SC 29623-5107

WILLIAMS, PHYLLIS S PH#: 864-225-4336

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0565 / 01/31/2010 Anderson / Corporation

PO BOX 5107

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

Certified For Alzheimers Unit Total Number of Licensed Beds 11

> Resident Beds: 11 **Resident Rooms** 6 **Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

VILLAGE COMMUNITY CARE HOME-UNIT D

1250 SALEM CHURCH RD ANDERSON, SC 29623-5107

WILLIAMS, PHYLLIS S PH#: 864-225-4336

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-0566 / 01/31/2010

Anderson / Corporation

PO BOX 5107

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

Total Number of Licensed Beds 11

Resident Beds: 11 **Resident Rooms** 6 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

VILLAGE INN COMMUNITY CARE HOME

112 POWELL ST

GRANITEVILLE, SC 29801-2906

HERRON, MICHELLE A PH#: 803-663-9495 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

Aiken / Sole Proprietorship

CRC-0396 / 03/31/2010

112 POWELL ST

GRANITEVILLE, SC 29829

MICHELLE A HERRON

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms 5 Staff Beds: 1 1 Staff Rooms: Other Beds: 0 Other Rooms: 0

WALTERS BROTHERS RESIDENTIAL CARE FACILITY

110 GEDDINGS RD SUMTER, SC 29150

WALTERS, JOHNNIE L PH#: 803-506-2743 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1080 / 04/30/2010

Sumter / Sole Proprietorship 3300 OLD MANNING RD

SUMTER, SC 29150 JOHNNIE L WALTERS

Total Number of Licensed Beds 20

Resident Beds: 20 **Resident Rooms** 10 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

WALTERS RESIDENTIAL CARE

821-823 DUKE AVE COLUMBIA, SC 29203

JOHNSON, DELORES W PH#: 803-252-8918

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0985 / 03/31/2010

Richland / Non-Profit Corporation

PO BOX 211263

COLUMBIA, SC 29221

MIPDINC

Total Number of Licensed Beds 35 Certified For Alzheimers Care

> Resident Beds: 35 **Resident Rooms** 18 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

WARE SHOALS MANOR

10 N GREENWOOD AVE WARE SHOALS, SC 29692

MORTON, EMMA M PH#: 864-456-7127

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-1457 / 10/31/2009 Greenwood / Ltd. Liability 10 N GREENWOOD AVE WARE SHOALS, SC 29692

HARMONY RESIDENTIAL CARE CENTER LLC

Total Number of Licensed Beds 24

Resident Beds: 24 **Resident Rooms** 12 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1034 / 08/31/2009

WE CARE RESIDENTIAL INC 2370 WILLISTON RD **AIKEN, SC 29803**

Aiken / Corporation 2394 WILLISTON RD BUSH, ETHEL E PH#: 803-652-3652 AIKEN, SC 29803

Fac. Cont. Email: No Fac. Cont. Email on record

WE CARE RESIDENTIAL INC

Certified For

Total Number of Licensed Beds 55

Resident Beds: 55 Resident Rooms 27 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

WESLEY COMMONS ASSISTED LIVING FACILITY AND SPECIAL CARE

HOUSE

1110 MARSHALL RD GREENWOOD, SC 29646

HOLMES, KIMBERLY K PH#: 864-227-7250

Fac. Cont. Email: KHOLMES@WESLEYCOMMONS.ORG

Certified For Alzheimers Care

Alzheimers Unit

CRC-1218 / 08/31/2009

Greenwood / Non-Profit Corporation

1110 MARSHALL RD GREENWOOD, SC 29646

WESLEY COMMONS

Total Number of Licensed Beds 56

Resident Beds: 56 **Resident Rooms** 47 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

WESLEYAN SUITES

2100 TWIN CHURCH RD FLORENCE, SC 29501

JACKSON, WILLIAM F PH#: 843-664-0700

Fac. Cont. Email: FJACKSON@METHODIST-MANOR.COM

CRC-0662 / 12/31/2009

Florence / Non-Profit Corporation

2100 TWIN CHURCH RD FLORENCE, SC 29501 **WESLEYAN SUITES**

Certified For Alzheimers Care

Alzheimers Unit

Total Number of Licensed Beds 95

Resident Beds: 95 **Resident Rooms** 65 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

WEST END RETIREMENT CENTER INC

200 S FIFTH ST EASLEY, SC 29640

OWENS, ELLEN A PH#: 864-859-4370

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0204 / 08/31/2009

Pickens / Corporation 200 S FIFTH ST EASLEY, SC 29640

WEST END RETIREMENT CENTER INC

Certified For Total Number of Licensed Beds 34

> Resident Beds: 34 **Resident Rooms** 14 0 Staff Rooms: 0 Staff Beds: Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0580 / 09/30/2009 York / Non-Profit Corporation

1330 INDIA HOOK RD ROCK HILL, SC 29732

WESTMINSTER TOWERS RESIDENTIAL

1330 INDIA HOOK RD ROCK HILL, SC 29732

FOUNTAIN, ANTHONY G PH#: 803-328-5134

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care Total Number of Licensed Beds 29

> Resident Beds: 29 Resident Rooms 29 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

WESTMINSTER PRESBYTERIAN CENTER INC

WESTSIDE RESIDENTIAL HOME

4112 HARTFORD ST COLUMBIA, SC 29204

JOHNSON, LOVICE D PH#: 803-786-7411 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0907 / 11/30/2009

Richland / Corporation PO BOX 7905

COLUMBIA, SC 29202-7905 WESTSIDE RESIDENTIAL HOME INC

Total Number of Licensed Beds 38

Resident Beds: 38 **Resident Rooms** 11 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

WHITAKER COMMUNITY CARE HOME

79 SAL SUE CT

COLUMBIA, SC 29224-2383 ANDERSON, VALENCIA W PH#:

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0210 / 08/31/2007 (Renewal Pending)

Richland / Corporation

PO BOX 23832

COLUMBIA, SC 29224-2383

MURRY'S COMMUNITY CARE HOME INC

Certified For Total Number of Licensed Beds 10

> Resident Beds: 10 5 **Resident Rooms** Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

WHITE OAK ESTATES ASSISTED LIVING INC

400 WEBBER RD

SPARTANBURG, SC 29307-3033 CATLETT, GARY D PH#: 864-579-7004

Fac. Cont. Email: GCATLETT@WHITEOAKMANOR.COM

CRC-1334 / 09/30/2009

Spartanburg / Corporation

400 WEBBER RD

SPARTANBURG, SC 29307-3033

WHITE OAK ESTATES ASSISTED LIVING INC

Certified For Alzheimers Care Total Number of Licensed Beds 45

> Resident Beds: 45 Resident Rooms 30 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration
County/Ownership Type
Mailing Address
Licensee

WHITNEY PLACE 107 CORNWELL ST UNION, SC 29379

WHITNEY, YOLANDE O PH#: 864-427-4275

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0572 / 02/28/2010 Union / Corporation 107 CORNWELL ST UNION, SC 29379

WHITNEY CORPORATION OF COLUMBIA INC

Total Number of Licensed Beds 24

Resident Beds: 24 Resident Rooms 14 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

WILDEWOOD DOWNS ASSISTED LIVING COMMUNITY

731 POLO RD

COLUMBIA, SC 29223

ABERNATHY, EVA MAE PH#: 803-788-5115

Fac. Cont. Email: HEATHERC@WILDEWOOD-DOWNS.COM

Certified For Alzheimers Care

Alzheimers Unit

CRC-1271 / 03/31/2010

Richland / Ltd. Liability

731 POLO RD

COLUMBIA, SC 29223

WILDWOOD DOWNS RETIREMENT L L C

Total Number of Licensed Beds 57

Resident Beds: 57 Resident Rooms 50
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

WILLIAMS COMMUNITY CARE HOME

7705 RICHARD ST

COLUMBIA, SC 29209-3733

WILLIAMS SR, CHARLES A PH#: 803-783-1223

Fac. Cont. Email: No Fac. Cont. Email on record

rac. Cont. Email. No

CRC-0280 / 11/30/2009

Richland / Sole Proprietorship

PO BOX 90031

COLUMBIA, SC 29290-1031 CHARLES A WILLIAMS SR

Certified For Total Number of Licensed Beds 9

Resident Beds: 9 Resident Rooms 4
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

WILLIAMSBURG RESIDENTIAL CARE FACILITY

14 WRCF ST

KINGSTREE, SC 29556-2596

JACKSON, JACQUES G PH#: 843-355-6214

Fac. Cont. Email: JGJACKSON@FTC-I.NET

Certified For

CRC-0038 / 03/31/2010 Williamsburg / Partnership

PO BOX 147

SALTERS, SC 29590

JACQUES G JACKSON AND SUSIE M GORDON

Total Number of Licensed Beds 24

Resident Beds: 24 Resident Rooms 9
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

WILLIE S II RCH 46 WILSON ST

SUMTER, SC 29150

WILLIAMS, TRACY L PH#: 803-481-7027 Fac. Cont. Email: TACEW90@AOL.COM

CRC-1485 / 12/31/2009 Sumter / Sole Proprietorship

WILLIAMS, TRACY L

Certified For

Total Number of Licensed Beds

Resident Beds: 5 **Resident Rooms** 3 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

WILLIE'S RESIDENTIAL CARE

244 MURPHY ST SUMTER, SC 29150

WILLIAMS, TRACEY L PH#: 803-775-6355 Fac. Cont. Email: TRACEW90@AOL.COM

Certified For

CRC-1262 / 03/31/2010 Sumter / Sole Proprietorship

PO BOX 3311

SUMTER, SC 29151-3311

TRACY L WILLIAMS

Total Number of Licensed Beds 5

Resident Beds: 5 **Resident Rooms** 3 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

WILLOW SPRINGS RESIDENTIAL CARE FACILITY

388 ELBOW CIR

RIDGEWAY, SC 29130

WOOD, EDNA S PH#: 803-337-8701

Fac. Cont. Email: RIDEDNA@TRUVISTA.NET

CRC-0659 / 12/31/2009

Fairfield / Non-Profit Corporation

PO BOX 159

RIDGEWAY, SC 29130

BIBLE LIGHT HOLINESS CHURCH

Certified For Total Number of Licensed Beds 20

> Resident Beds: 20 12 **Resident Rooms Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

WILLOWS OF EASLEY

105 WILLOW PL

EASLEY, SC 29641

BOLTON, SUSAN W PH#: 864-855-9800

Fac. Cont. Email: KEVIN@THEWILLOWSOFEASLEY.COM

Certified For Alzheimers Care

CRC-0944 / 06/30/2009

Pickens / Corporation

PO BOX 1807

EASLEY, SC 29641

WILLOWS OF EASLEY

Total Number of Licensed Beds 50

Resident Beds: 50 **Resident Rooms** 48 Staff Beds: 0 Staff Rooms: 0 0

Other Beds:

0

Other Rooms:

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

WINDSOR HOUSE GREENVILLE

1931 PELHAM RD

GREENVILLE, SC 29615

POLLARD JR, JOE W PH#: 864-288-9450 Fac. Cont. Email: JPOLLARD212@AOL.COM

Certified For

Greenville / Ltd. Liability 1931 PELHAM RD

CRC-1388 / 07/31/2009

GREENVILLE, SC 29615 WHG ASSISTED LIVING LLC

Total Number of Licensed Beds 50

Resident Rooms Resident Beds: 50 31 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

WINDSOR HOUSE WEST

850 JOHN B WHITE SR BLVD SPARTANBURG, SC 29306

BOWMAN, KAREN PH#: 000-000-0000 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

Alzheimers Unit

CRC-1369 / 11/30/2009

Spartanburg / Ltd. Liability

PO BOX 6384

SPARTANBURG, SC 29304 WHW ASSOCIATES LLC

Total Number of Licensed Beds 108

Resident Beds: 108 **Resident Rooms** 74 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

WOLFE HOUSE

740 BLVD ST NE

ORANGEBURG, SC 29115

EISOM, SHERRY L PH#: 803-536-1571

Fac. Cont. Email: No Fac. Cont. Email on record

CRC-0826 / 07/31/2009 Orangeburg / State

740 BLVD ST NE

ORANGEBURG, SC 29115

ORANGEBURG AREA MENTAL HEALTH CENTER

Certified For Total Number of Licensed Beds

> **Resident Beds:** 5 5 **Resident Rooms Staff Rooms:** Staff Beds: 0 0 Other Beds: 0 Other Rooms: 0

WOODARD'S COMMUNITY CARE HOME I

615 W EVANS ST

FLORENCE, SC 29501

EADDY, MARCOLA C PH#: 843-665-4940 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For

CRC-0301 / 08/31/2009

Florence / Sole Proprietorship

PO BOX 255

FLORENCE, SC 29503 MARCOLA EADDY

Total Number of Licensed Beds

Resident Beds: 9 **Resident Rooms** 4 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

WRIGHT'S RESIDENTIAL CARE #1

950 OLD SPARTANBURG HWY

WELLFORD, SC 29385

WRIGHT, DIANNE E PH#: 864-249-0412 Fac. Cont. Email: DDIANE40SC@AOL.COM

Certified For

CRC-0617 / 01/31/2010

Spartanburg / Sole Proprietorship

PO BOX 268

WELLFORD, SC 29385 DIANNE E WRIGHT

Total Number of Licensed Beds 10

Resident Beds: 10 **Resident Rooms** 4 Staff Beds: 0 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

WRIGHT'S RESIDENTIAL CARE #2 A & B

12A & B RIVER ST LYMAN, SC 29365

WRIGHT, DIANNE E PH#: 864-949-6437 Fac. Cont. Email: DIWRIGHT57@YAHOO.COM CRC-1319 / 07/31/2009

Spartanburg / Sole Proprietorship

PO BOX 268

WELLFORD, SC 29385 DIANNE E WRIGHT

Certified For Total Number of Licensed Beds 10

> Resident Beds: 10 **Resident Rooms** 5 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

WYLIE HALL

16 FRANK PRESSLY DR DUE WEST, SC 29639

PRIDMORE, ROBERT P PH#: 864-379-2554 Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Alzheimers Care

CRC-1207 / 04/30/2010

Abbeville / Non-Profit Corporation

PO BOX 307

DUE WEST, SC 29639

COVENANT WAY

Total Number of Licensed Beds 20

Resident Beds: 20 **Resident Rooms** 20 Staff Beds: Staff Rooms: 0 0 Other Beds: 0 Other Rooms: 0

YORKTOWNE VILLAGE

40-42-44 ROSS CANNON ST

YORK, SC 29745

PICARD, JACKI H PH#: 803-684-0183

Fac. Cont. Email: AK_YORKVILG@COMPORIUM.NET

Certified For Alzheimers Care

Alzheimers Unit

CRC-1368 / 08/31/2009

York / Corporation

40-42-44 ROSS CANNON ST

YORK, SC 29745

CITE HEALTH MANAGEMENT SERVICES INC

Total Number of Licensed Beds 164

Resident Beds: 164 Resident Rooms 82 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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Community Residential Care Facilities

DHEC Regulation 61-84

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1433 / 02/28/2010

CRC-1297 / 06/30/2009

COLUMBIA, SC 29240-4706

Bamberg / State

PO BOX 4706

YOUNGBLOOD'S ASSISTED LIVING HOME

1500 FORK AVE Lexington / Sole Proprietorship

IRMO, SC 29063 1500 FORK AVE YOUNGBLOOD, ANGELA S PH#: 803-740-4861 IRMO, SC 29063

Fac. Cont. Email: YOUNGBLOODS@SC.RR.COM ANGELA S YOUNGBLOOD

Certified For Alzheimers Care Total Number of Licensed Beds

Resident Beds: 5 Resident Rooms 3
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

ZEIGLER STREET COMMUNITY RESIDENCE

71 ZEIGLER ST

BAMBERG, SC 29003-1034

PHAIRE, CARLTON PH#: 803-245-6169

Fac. Cont. Email: No Fac. Cont. Email on record

Certified For Total Number of Licensed Beds 8

Resident Beds: 8 Resident Rooms 4
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Resident Beds: 8 Resident Rooms

Total Number of Facilities: 482 Alzheimers Care: 170 Alzheimers Units: 76 Licensed Beds: 16,715

Resident Beds: 16,675 Staff Beds: 140 Other Beds: 0
Resident Rooms: 11,797 Staff Rooms: 123 Other Rooms: 0